| Fill in this information to identify your case: |  |                                    |
|---|--|------------------------------------|
| United States Bankruptcy Court for the :        |  |                                    |
| NORTHERN District of ILLINOIS (State)           |  |                                    |
| Case Number (If known):                         | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is an amended filing |

## **Official Form 101**

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1:       | Identify Yourself  |                            |   |
|---------------|--|----------------------------|---|
|               |  | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. <b>Y</b> 0 | our full name  |                            |   |
| go            | rite the name that is on your vernment-issued picture            | Quillita First name        | First name                                    |
| yo            | entification (for example,<br>ur driver's license or<br>ssport). | Tameka<br>Middle name      | Middle name                                   |
| ide           | ing your picture entification to your meeting                    | Rayford Last name          | Last name                                     |
| wit           | th the trustee.  | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
|               | l other names you  |                            |   |
|               | eve used in the last 8 pars                                      | First name                 | First name                                    |
|               | clude your married or aiden names.                               | Middle name                | Middle name                                   |
|               |  | Last name                  | Last name                                     |
|               |  | First name                 | First name                                    |
|               |  | Middle name                | Middle name                                   |
|               |  | Last name                  | Last name                                     |
|               | nly the last 4 digits of<br>our Social Security                  | xxx - xx4599               | XXX - XX                                      |
| nu<br>Ind     | mber or federal<br>dividual Taxpayer                             | OR                         | OR  |
| Ide           | entification number  | <b>9</b> xx - xx           | 9xx - xx                                      |
|               |  |                            |   |

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Document Rayford Quillita Tameka Debtor 1 Case Number (if known) Last Name

|    |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |  |  |
|----|---|---|---|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names | I have not used any business names or EINs.  Business name  Business name  EIN  EIN   | Business name Business name EIN  EIN  |  |  |
| 5. | Where you live  | 9645 S Avenue M   | If Debtor 2 lives at a different address:   |  |  |
|    |   | Number Street Unit 1W   | Number Street   |  |  |
|    |   | Chicago         IL         60617           City         State         ZIP Code           COOK         County  | City State ZIP Code  County   |  |  |
|    |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.                                   | If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address.   |  |  |
|    |   | Number Street   | Number Street   |  |  |
|    |   | P.O. Box  City State ZIP Code   | P.O. Box  City State ZIP Code   |  |  |
| 6. | Why you are choosing this district to file for bankruptcy.  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  have another reason. Explain. (See 28 U.S.C. § 1408 | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408 |  |  |
|    |   |   |   |  |  |

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Debtor 1

Quillita

Tameka

Document Rayford

Last Name

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| Pa  | Tell the Court About You  | r Bankruptcy           | Case   |   |                 |   |              |  |
|-----|---|------------------------|--|---|-----------------|---|--------------|--|
| 7.  | The chapter of the<br>Bankruptcy Code you<br>are choosing to file<br>under        |                        | Bankrup  | •   |                 | equired by 11 U.S.C. § 342(b) for I<br>page 1 and check the appropriate b |              |  |
|     | undo  | ☐ Chap                 | ter 11   |   |                 |   |              |  |
|     |   | ☐ Chap                 | ter 12   |   |                 |   |              |  |
|     |   | ■ Chap                 | ter 13   |   |                 |   |              |  |
| 8.  | How you will pay the fee  | local<br>yours<br>subn | court for self, you nitting y  | pay the entire fee when I file my petition. Please check with the clerk's office in your court for more details about how you may pay. Typically, if you are paying the fee elf, you may pay with cash, cashier's check, or money order. If your attorney is itting your payment on your behalf, your attorney may pay with a credit card or check pre-printed address. |                 |   |              |  |
|     |   |                        | -  | I to pay the fee in installments. If you choose this option, sign and attach the cation for Individuals to Pay The Filing Fee in Installments (Official Form 103A).   |                 |   |              |  |
|     |   | By la<br>less<br>pay t | quest that my fee be waived (You may request this option only if you are filing for Chapter 7. law, a judge may, but is not required to, waive your fee, and may do so only if your income is than 150% of the official poverty line that applies to your family size and you are unable to the fee in installments). If you choose this option, you must fill out the <i>Application to Have the apter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition. |   |                 |   |              |  |
| 9.  | Have you filed for bankruptcy within the last 8 years?                            | □ No ■ Yes.            | District   | Ilnbke  | When            | 03/06/2013 Case Number  | 13-22476     |  |
|     |   | 103.                   | District   |   | Wilcii          | MM / DD / YYYY  |              |  |
|     |   |                        | District   | None  | When            | Case Number   |              |  |
|     |   |                        |  |   |                 | MM / DD / YYYY  |              |  |
|     |   |                        | District   |   | When            | Case Number   |              |  |
|     |   |                        |  |   |                 | MM / DD / YYYY  |              |  |
| 10. | Are any bankruptcy cases pending or being   | No                     |  |   |                 |   |              |  |
|     | filed by a spouse who is  | ☐ Yes.                 |  |   |                 | Relationship to you _   |              |  |
|     | not filing this case with<br>you, or by a business<br>parter, or by<br>affiliate? |                        | District   |   | When            | Case Number, if kn<br>MM / DD / YYYY                                      | own          |  |
|     | anniate:  |                        | Debtor   |   |                 | Relationship to you _   |              |  |
|     |   |                        | District   |   | When            | Case Number, if kn  | own          |  |
| 11. | Do you rent your residence?   | ■ No.                  | Go to l<br>Has yo  | our landlord obtained an  | eviction judgme | ent against you and do you want to  | stay in your |  |
|     |   |                        | <ul> <li>No. Go to line 12.</li> <li>Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.</li> </ul>   |   |                 |   |              |  |

Debtor 1 Quillita Tameka Document Rayford Page 4 of 63

Case Number (if known)

| Name of business, if any  Name of business,  | <ol> <li>Are you a sole proprietor<br/>of any full- or part-time<br/>business?</li> <li>A sole proprietorship is a</li> </ol> | ■ No.<br>□ Yes. | Go to Part 4.  Name and location of  | business                   |                      |               |      |  |
|--|---|-----------------|--|----------------------------|----------------------|---------------|------|--|
| Number   Street   Number   Number   Street   Number   N   | business you operate as an individual, and is not a separate legal entity such as   |                 | Name of business, if any   |                            |                      |               |      |  |
| Check the appropriate box to describe your business:    Health Care Business (as defined in 11 U.S.C. § 101(27A))   Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))   Stockbroker (as defined in 11 U.S.C. § 101(53A))   Commodity Broker (as defined in 11 U.S.C. § 101(69))   None of the above    None of the above   None of the above   | LLC. If you have more than one sole proprietorship, use a separate sheed and attach it  |                 | Number Street  |                            |                      |               |      |  |
| Health Care Business (as defined in 11 U.S.C. § 101(27A))   Single Asset Real Estate (as defined in 11 U.S.C. § 101(61B))   Stockbroker (as defined in 11 U.S.C. § 101(63A))   Commodity Broker (as defined in 11 U.S.C. § 101(6))   Nane of the above  If you are filling under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).  No. I am not filling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.  Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.  Yes. What is the hazard?  If you are filling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.  Yes. What is the hazard?  If immediate attention is needed, why is it needed?  Where is the property?  Number Street  |   |                 | City   |                            |                      | State Zip Cod | le   |  |
| Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))   Stockbroker (as defined in 11 U.S.C. § 101(63A))   Commodity Broker (as defined in 11 U.S.C. § 101(69))   None of the above   If you are filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor. Yes addition of small business debtor. See 11 U.S.C. § 101(51D).   No.   I am filing under Chapter 11.   In the court must know whether you are a small business debtor, you must attach your most rebalance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of the documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).   No.   I am filing under Chapter 11.   In the sharkruptcy Code.   Yes.   I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.   Yes.   I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.   Yes.   I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.   Yes.   Y   |   |                 | Check the appropriate  | box to describe your bu    | siness:              |               |      |  |
| Stockbroker (as defined in 11 U.S.C. § 101(53A))   Commodity Broker (as defined in 11 U.S.C. § 101(6))   None of the above   |   |                 | ☐ Health Care Bus  | iness (as defined in 11 U  | .S.C. § 101(27A))    |               |      |  |
| Commodity Broker (as defined in 11 U.S.C. § 101(6))   None of the above    None of the above   None of the above   |   |                 | ☐ Single Asset Re  | al Estate (as defined in 1 | 1 U.S.C. § 101(51B)) |               |      |  |
| Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor you must attach your most re balance shedy sate befor?  For a definition of small business debtor, see 11 U.S.C. § 101(51D).  No. I am not filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  The Bankruptcy Code.  Seport If You own or Have Any Hazardous Property or Any Property That Needs Immediate Attention  No.  What is the hazard?  If you are filing under Chapter 11, the court must know whether you are a small business debtor you must attach your most re balance sheet, statement of operations, cash-flow statement, and feeral income tax return or if any of the documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  No. I am not filing under Chapter 11.  No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  The Bankruptcy Code.  Yes. What is the hazard?  If you are filing under Chapter 11, the court must know whether you are a small business debtor some tax return or if any of the documents of the procedure in 11 U.S.C. § 1116(1)(B).  No. I am not filing under Chapter 11.  No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  Yes. What is the hazard?  If you are filing under Chapter 11, the court must know whether you are a small business debtor according to that the paparous forms a small business debtor according to the definition in the Bankruptcy Code.  No. I am not filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  Yes. What is the hazard?  If you are filing under Chapter 11, the court must know whether you are a small business debtor according to the definition in the Bankruptcy Code.  No. I am not filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  If you are filing under Ch |   |                 | ☐ Stockbroker (as  | defined in 11 U.S.C. § 10  | 01(53A))             |               |      |  |
| Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor, so mall business debtor, see 11 U.S.C. § 101(51D).  If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most re balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of the documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  No. 1 am not filing under Chapter 11.  No. 1 am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.  Part 4:  Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention  No.  Yes. What is the hazard?  If immediate attention is needed, why is it needed?    Where is the property?   |   |                 | ☐ Commodity Brok   | er (as defined in 11 U.S.  | C. § 101(6))         |               |      |  |
| Chapter 11 of the Bankruptcy Code and are you a small business debtor?  For a definition of small business debtor, see 11 U.S.C. § 101(51D).  No. I am not filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.  Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.  No. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.  Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.  No. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.  Yes. What is the hazard?  If immediate attention is needed, why is it needed?  Where is the property?  Number Street   |   |                 | ☐ None of the abo  | ve                         |                      |               |      |  |
| In Do you own or have any property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety?  Or do you own any property that needs immediate attention?  For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?  Where is the property?  Number Street  | business debtor, see  | ☐ No.           | am filing under Chapte<br>the Bankruptcy Code.<br>I am filing under Chapte | r 11, but I am NOT a sma   |                      | -             |      |  |
| property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety?  Or do you own any property that needs immediate attention?  For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?  Where is the property?  Number Street  | Part 4: Report if You Own or Ha   | ve Any Hazard   | lous Property or Any Pro   | perty That Needs Immedia   | ate Attention        |               |      |  |
| property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety?  Or do you own any property that needs immediate attention?  For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?  Where is the property?  Number Street  |   | <b>.</b>        |  |                            |                      |               |      |  |
| public health or safety?  Or do you own any property that needs immediate attention?  For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?  Where is the property?  Number Street   | property that poses or is alleged to pose a threat  | _               | What is the hazard?  |                            |                      |               |      |  |
| If immediate attention?  For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?  Where is the property?  Number Street  | public health or safety?<br>Or do you own any   |                 |  |                            |                      |               |      |  |
| Where is the property?  Number Street  | immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building                   |                 | If immediate attention is  | s needed, why is it neede  | d?                   |               |      |  |
| Number Street  | tnat needs urgent repairs?  |                 |  |                            |                      |               |      |  |
| Other 700 C  |   |                 | Where is the property?   |                            |                      |               |      |  |
| Ott. 7ID C   |   |                 |  |                            |                      |               |      |  |
| CITY State ZIP C   |   |                 |  | City                       | <del></del> ,        | State ZIP     | Code |  |

Debtor 1

Document Rayford

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Quillita

Tameka

Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|---|---|
| You must check one:   | You must check one:   |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.  | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.  |
| Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.   | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.   |
| Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.   | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.   |
| I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.   | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.   |
| To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  |
| Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. |
| I am not required to receive a briefing about credit counseling because of:   | I am not required to receive a briefing about credit counseling because of:   |
| Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  |
| Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.  | Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.  |
| Active duty. I am currently on active military  | Active duty. I am currently on active military  |

duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

duty in a military combat zone.

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

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Case Number (if known)

| Pa  | rt 6: Answer These Questions   | for Reporting Purposes  |  |   |  |  |  |  |  |
|---|--|---|--|---|--|--|--|--|--|
| 16.   | What kind of debts do you have?  |   | consumer debts? Consumer debts are deprimarily for a personal, family, or household primarily for a personal primarily f | ebts? Consumer debts are defined in 11 U.S.C. § 101(8) personal, family, or household purpose." |  |  |  |  |  |
|   |  | 16b. <b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. |  |   |  |  |  |  |  |
|   |  | No. Go to line 16c.   |  |   |  |  |  |  |  |
|   |  | Yes. Go to line 17.   |  |   |  |  |  |  |  |
|   |  | 16c. State the type of debts you o  | we that are not consumer debts or business d   | debts.  |  |  |  |  |  |
| 17.   | Are you filing under   | No. I am not filing under Ch  | apter 7. Go to line 18.  |   |  |  |  |  |  |
|   | Chapter 7?   |   | ·<br>er 7. Do you estimate that after any exempt p   | ronarty is excluded and   |  |  |  |  |  |
|   | Do you estimate that after   |   | s are paid that funds will be available to distrib   | · · ·   |  |  |  |  |  |
|   | any exempt property is<br>excluded and   | □No.  |  |   |  |  |  |  |  |
|   | administrative expenses  Yes.  |   |  |   |  |  |  |  |  |
|   | are paid that funds will be  | <u>ш</u> тез.   |  |   |  |  |  |  |  |
|   | available for distribution to unsecured creditors?   |   |  |   |  |  |  |  |  |
| 18.   | How many creditors do  | 1-49  | 1,000-5,000  | 25,001-50,000   |  |  |  |  |  |
|   | you estimate that you  | <br>□ 50-99   | □ 5,001-10,000   | 50,001-100,000  |  |  |  |  |  |
|   | owe?   | <b>1</b> 00-199   | 10,001-25,000  | ☐ More than 100,000   |  |  |  |  |  |
|   |  | 200-999   |  |   |  |  |  |  |  |
| 19.   | How much do you  | \$0-\$50,000  | \$1,000,001-\$10 million   | □\$500,000,001-\$1 billion  |  |  |  |  |  |
|   | estimate your assets to  | <b>\$50,001-\$100,000</b>   | \$10,000,001-\$50 million  | □\$1,000,000,001-\$10 billion   |  |  |  |  |  |
|   | be worth?  | ☐ \$100,001-\$500,000<br>☐ \$500,001-\$1 million  | □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million   | ☐\$10,000,000,001-\$50 billion<br>☐More than \$50 billion                                       |  |  |  |  |  |
|   |  |   |  |   |  |  |  |  |  |
| 20.   | How much do you  | □ \$0-\$50,000<br>□ \$50,001,\$100,000  | ☐ \$1,000,001-\$10 million<br>☐ \$10,000,001-\$50 million  | □\$500,000,001-\$1 billion  |  |  |  |  |  |
|   | estimate your liabilities to be?   | \$50,001-\$100,000<br>\$100,001-\$500,000   | \$10,000,001-\$50 million  | □\$1,000,000,001-\$10 billion □\$10,000,000,001-\$50 billion                                    |  |  |  |  |  |
|   |  | □ \$500,001-\$1 million   | \$100,000,001-\$500 million  | ☐ More than \$50 billion  |  |  |  |  |  |
| Pa  | rt 7: Sign Below   |   |  |   |  |  |  |  |  |
|   |  | I have examined this petition, and  | declare under penalty of perjury that the info   | rmation provided is true and  |  |  |  |  |  |
| For   | you  | correct.  |  |   |  |  |  |  |  |
| If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. |  |   |  |   |  |  |  |  |  |
| If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  |  |   |  |   |  |  |  |  |  |
|   | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.   |   |  |   |  |  |  |  |  |
|   | I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |   |  |   |  |  |  |  |  |
|   |  | 🗶 /s/ Quillita Tameka Ra  |  |   |  |  |  |  |  |
|   |  | Signature of Debtor 1   | Signa  | ture of Debtor 2  |  |  |  |  |  |
|   |  | Executed on02/21/2017   | Evacu  | uted on   |  |  |  |  |  |
|   |  | MM / DD /   |  | MM / DD / YYYY  |  |  |  |  |  |

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| Debtor 1 | Quillita   | Tameka      | Rayford   | Case Number (if known) |
|----------|------------|-------------|-----------|------------------------|
|          | First Name | Middle Name | Last Namo |                        |

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 🗶 /s/ Lisa LaShawn Haley         | Date      | Date: 02/22/2017  MM / DD / YYYY |           |
|----------------------------------|-----------|----------------------------------|-----------|
| Signature of Attorney for Debtor | Dute      |                                  |           |
| Lisa LaShawn Haley               |           |                                  |           |
| Printed name                     |           |                                  |           |
| Geraci Law L.L.C.                |           |                                  |           |
| Firm name                        |           |                                  |           |
| 55 E. Monroe St., #3400          |           |                                  |           |
| Number Street                    |           |                                  |           |
|                                  |           |                                  |           |
| Chicago                          | IL        | 60603                            |           |
| City                             | State     | ZIP Code                         |           |
| Contact Phone312-332-1800        | Email add | <sub>dress</sub> ndil@gera       | cilaw.com |
| 6307614                          | IL        |                                  |           |
| Bar number                       | State     |                                  |           |
| sar number                       | State     |                                  |           |

| Fill in this information to identify your case: |                  |   |                     |  |  |
|---|------------------|---|---------------------|--|--|
| Debtor 1  | Quillita         | Tameka  | Rayford             |  |  |
|   | First Name       | Middle Name                                     | Last Name           |  |  |
| Debtor 2  | -                |   |                     |  |  |
| (Spouse, if filing)                             | First Name       | Middle Name                                     | Last Name           |  |  |
| United States                                   | Bankruptcy Court | for the : <u>NORTHERN</u> District of <u>II</u> | LLINOIS_<br>(State) |  |  |
| Case Number                                     |                  |   | -                   |  |  |
| (If known)                                      |                  |   |                     |  |  |

# Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Part 1:  | Summarize Your Assets   |  |
|----------|---|--|
|          |   | <b>Your assets</b> Value of what you own |
|          | e A/B: Property (Official Form 106A/B) y line 55, Total real estate, from Schedule A/B  | <u> </u>                                 |
| 1ь. Сору | line 62, Total personal property, from Schedule A/B   | \$ 7,036                                 |
| 1с. Сору | v line 63, Total of all property on Schedule A/B  | \$ 7,036                                 |
| Part 2:  | Summarize Your Liabilities  |  |
|          |   | Your liabilities<br>Amount you owe       |
|          | e D: Creditors Who Have Claims Secured by Property (Official Form 106D) the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$7,884                                  |
|          | e E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$1,219<br>\$116,253                     |
| 3ь. Сору | the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | Ψ110,200                                 |
|          |   |  |
| Part 3:  | Summarize Your Liabilities  |  |
|          | e I: Your Income (Official Form 106I) our combined monthly income from line 12 of Schedule I  | \$1,924.11                               |
|          | e J: Your Expenses (Official Form 106J) our monthly expenses from line 22c of Schedule J  | \$1,473.88                               |

Document Rayford Quillita Tameka Case Number (if known) \_ Debtor 1

Last Name

| Part 4:         | Answer These Questions for Administrative and Statistical Records  |              |   |  |  |  |
|-----------------|--|--------------|---|--|--|--|
|                 | Are you filing for bankruptcy under Chapter 7, 11 or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  Yes  |              |   |  |  |  |
|                 | <ul> <li>7. What kind of debt do you have?</li> <li>Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.</li> <li>Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.</li> </ul> |              |   |  |  |  |
| 8. <b>Fro</b> r | \$ 2,796.04  |              |   |  |  |  |
|                 | y the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :  m Part 4 of Schedule E/F, copy the following:   | Total claim  |   |  |  |  |
|                 | Domestic support obligations (Copy line 6a.)   | \$_0.00      |   |  |  |  |
| 9b. 1           | Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$_1,219.00  |   |  |  |  |
| 9c. (           | Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$_0.00      |   |  |  |  |
| 9d. S           | Student loans. (Copy line 6f.)   | \$_90,537.00 |   |  |  |  |
|                 | Obligations arising out of a separation agreement or divorce that you did not report as ity claims. (Copy line 6g.)  | \$ 0.00      |   |  |  |  |
| 9f. [           | Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)   | \$_0.00      | _ |  |  |  |
| 9g. 1           | Fotal. Add lines 9a through 9f.  | \$_91,756.00 |   |  |  |  |

First Name

Middle Name

|  | Caso 1  | 7.05105 Doc 1   | Eilad 02/22/17   | Entered 02/22/17 14  | 4:34:30 De            | esc Main  |   |
|--|---|---|--|--|-----------------------|---|---|
| Fill in this in  | formation to ide  | ntify your case and this fili   | ng:  | 0 of 63  |                       | .co maii  |   |
| Debtor 1   | Quillita  | Tameka  | Rayford  |  |                       |   |   |
|  | First Name  | Middle Name   | Last Name  |  |                       |   |   |
| Debtor 2<br>(Spouse, if filing)  | First Name  | Middle Name   | Last Name  |  |                       |   |   |
| United States  | Bankruptcy Court fo   | or the : <u>NORTHERN</u> Distri   | ct of <u>ILLINOIS</u>  |  |                       |   |   |
| Case Number  |   |   | (State)  |  |                       | Check if this is an   |   |
| (If known)   |   |   |  |  |                       | amended filing  |   |
| Official F   | <u>orm 106A</u>   | <u>/B</u>   |  |  |                       |   |   |
| Schedul  | e A/B: Pr   | operty  |  |  |                       | 12/15   |   |
| esponsible for ages, write you on the second of the second | supplying corre ur name and cas Describe Each Re rn or have any le  Describe  | ct information. If more spa<br>e number (if known). Ansv<br>sidence, Building, Land, or C<br>gal or equitable interest in | ice is needed, attach a separa<br>ver every question.<br>Other Real Esate You Own or Ha<br>any residence, building, land   | l, or similar property?  |                       |   |   |
|  | -   | -   | our entries fro Part 1, includir   |  | <b>&gt;</b>           | \$0.00  |   |
|  |   |   |  |  | •                     | \$0.00  |   |
| Part 2:  | Describe Your Vel   | nicles  |  |  |                       |   | _ |
| No. Yes.  No. Yes.  No. Yes.  No. Yes.  No. Yes.   | Describe flake: flodel: fear: spproximate Milea other information: f, aircraft, motor Boats, trailers, motor Describe | homes, ATVs and other re<br>ors, personal watercraft, fishing   | Who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is comminstructions)  creational vehicles, other vehicles, snowmobiles, motorcycle | ly s and another unity property (see sicles, and accessories accessories | the amount of any sec | portion you own?  |   |
|  |   |   | our entries fro Part 2, includir   | ng any entries for pages   |                       | \$ 5,376.0  | 0 |
|  |   | sonal and Household Items   |  |  |                       |   | _ |
| rait 5.  |   | or equitable interest in any  | of the following items?  |  |                       | Current value of the portion you own?  Do not deduct secured claims or exemptions |   |
| Examples:  |   | nishings<br>urniture, linens, china, kitchenw   | rare   |  |                       |   |   |
| Yes.   | Describe  | Furniture, linens, small appliar  | nces, table & chairs, bedroom set  |  | \$1,000               | \$ 1,000.00   | , |

Quillita Debtor 1

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Rayford
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| 07.   | Electronics                             | ;                     |   |      |                 |              |
|-------|---|-----------------------|---|------|-----------------|--------------|
|       | Examples:                               | Televisions and ra    | dios; audio, video, stereo, and digital equipment; computers, printers, scanners; music   |      |                 |              |
|       | collections;                            | electronic devices    | including cell phones, cameras, media players, games                                      |      |                 |              |
|       | No.                                     |                       |   |      |                 |              |
|       | Yes.                                    | Describe              |   |      |                 |              |
|       |   |                       | Flat screen TV, computer, printer, music collection, cell phone \$50                      | 10   |                 |              |
|       |   |                       |   |      | \$              | 500.00       |
| 08.   | Collectibles                            | s of value            |   |      |                 |              |
|       | Examples: A                             | Antiques and figuri   | ines; paintings, prints, or other artwork; books, pictures, or other art objects;         |      |                 |              |
|       |   |                       | collections; other collections, memorabilia, collectibles                                 |      |                 |              |
|       | No.                                     |                       |   |      |                 |              |
|       | Voc                                     | Describe              |   |      |                 |              |
|       | Yes.                                    | Describe              |   |      | •               | 0.00         |
|       | F                                       | £                     | Labbia.   |      | \$              | <u>0.0</u> 0 |
| 09.   |   | for sports and        |   |      |                 |              |
|       |   |                       | nic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes |      |                 |              |
|       | _                                       | , carpentry tools, in | nusical instruments   |      |                 |              |
|       | No.                                     |                       |   |      |                 |              |
|       | Yes.                                    | Describe              |   |      |                 |              |
|       |   |                       |   |      | \$              | 0.00         |
| 10.   | Firearms                                |                       |   |      |                 |              |
|       | Examples: I                             | Pistols, rifles, shot | guns, ammunition, and related equipment   |      |                 |              |
|       | No.                                     |                       |   |      |                 |              |
|       | Yes.                                    | Describe              |   |      |                 |              |
|       |   | D0001100              |   |      | \$              | 0.00         |
| 11    | Clothes                                 |                       |   |      | Ψ               |              |
| ' ' ' |   | Everyday clothes      | furs, leather coats, designer wear, shoes, accessories                                    |      |                 |              |
|       |   | _veryddy ciotrics,    | idis, icatici coats, acsigner wear, snoes, accessories                                    |      |                 |              |
|       | No.                                     |                       |   |      |                 |              |
|       | Yes.                                    | Describe              |   |      |                 |              |
|       |   |                       | Everyday clothes, shoes, accessories \$10   | 10   |                 |              |
|       |   |                       |   |      | \$              | 100.00       |
| 12.   | Jewelry                                 |                       |   |      |                 |              |
|       | Examples: I                             | Everyday jewelry,     | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,        |      |                 |              |
|       | gold, silver                            |                       |   |      |                 |              |
|       | No.                                     |                       |   |      |                 |              |
|       | Yes.                                    | Describe              |   |      |                 |              |
|       |   |                       | Everyday jewelry, costume jewelry \$5   | 0    |                 |              |
|       |   |                       |   |      | \$              | 50.00        |
| 13.   | Non-farm a                              | nimals                |   |      |                 |              |
|       | Examples: [                             | Dogs, cats, birds, h  | norses  |      |                 |              |
|       | No.                                     |                       |   |      |                 |              |
|       | <b>=</b>                                | Dogoribo              |   |      |                 |              |
|       | Yes.                                    | Describe              |   |      | •               | 0.00         |
| ١     |   |                       |   |      | \$              | 0.00         |
| 14.   |   | personal and ho       | ousehold items you did not already list, including any health aids you did not list       |      |                 |              |
|       | No.                                     |                       |   |      |                 |              |
|       | Yes.                                    | Describe              |   |      |                 |              |
|       | <del></del>                             |                       |   |      | \$              | 0.00         |
| 15.   | Add the do                              | lar value of all      | of your entries from Part 3, including any entries for pages you have attached            |      |                 |              |
| '     |   |                       | per here  |      |                 | \$1,650.00   |
| L     | IOI Fait 3. V                           | write that numb       | er nere   |      |                 |              |
|       | р.                                      | escribe Your Fin      | nancial Accets  |      |                 |              |
|       | Part 4:                                 |                       |   |      |                 |              |
| Do    | vou own or                              | have any legal        | or equitable interest in any of the following?  | Cur  | rrent value of  | the          |
|       | , | navo any logar        | or equitable interest in any or the following.  |      | rtion you own   |              |
|       |   |                       |   | -    | not deduct secu |              |
|       |   |                       |   |      | exemptions      |              |
| 16    | Cash                                    |                       |   | 3. 0 | , ,,,,,,,       |              |
| 10    |   | Money you have in     | your wallet, in your home, in a safe deposit box, and on hand when you file your petition |      |                 |              |
|       |   | noncy you have in     | i your manor, in your nome, in a saic deposit box, and on hand when you me your perition  |      |                 |              |
|       | No.                                     |                       |   |      |                 |              |
|       | Yes.                                    | Describe              |   |      |                 |              |
|       |   |                       |   |      | \$              | 0.00         |
|       |   |                       |   |      |                 |              |

Debtor 1

Quillita

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Desc Main

First Name Middle Name Document Last Name

| 17. | Deposits o   | r money              |   |  |                                       |
|-----|--------------|----------------------|---|--|---------------------------------------|
|     | Examples:    | Checking, savings    | , or other financial accounts; certific | cates of deposit; shares in credit unions, brokerage houses,         |                                       |
|     | and other s  | imilar institutions. | If you have multiple accounts with t    | he same institution, list each.                                      |                                       |
|     | No.          |                      |   |  |                                       |
|     | Yes.         | Describe             | Account Type:                           | Institution name:  |                                       |
|     |              |                      | Other financial account                 | AMEX Prepaid Debit   | <b>\$</b> 10.00                       |
|     |              |                      |   |  | ·                                     |
|     |              |                      |   |  | \$ <u>10.0</u> 0                      |
| 18. |              | -                    | ublicly traded stocks                   |  |                                       |
|     | Examples:    | Bond funds, invest   | ment accounts with brokerage firm       | s, money market accounts   |                                       |
|     | No.          |                      |   |  |                                       |
|     | Yes.         | Describe             | Institution or issuer name:             |  |                                       |
|     | _            |                      |   |  | \$ 0.00                               |
| 19  | Non-nublic   | ly traded stock      | and interests in incorporated           | d and unincorporated businesses, including an interest in            | ·                                     |
| 10. |              | ny traded stock      | and interests in incorporated           | and difficor porated businesses, moldaling an interest in            |                                       |
|     | No.          |                      |   |  |                                       |
|     | Yes.         | Describe             | Name of Entity and Percent of           | f Ownership:   |                                       |
|     |              |                      |   |  | \$ <u> </u>                           |
| 20. | Governme     | nt and corporat      | e bonds and other negotiable            | and non-negotiable instruments                                       |                                       |
|     | Negotiable   | instruments includ   | e personal checks, cashiers' check      | ss, promissory notes, and money orders.                              |                                       |
|     | Non-negotia  | able instruments a   | re those you cannot transfer to som     | neone by signing or delivering them.                                 |                                       |
|     | No.          |                      |   |  |                                       |
|     | <b>=</b>     | Dogoribo             | Issuer name:                            |  |                                       |
|     | Yes.         | Describe             | issuel fiame.                           |  |                                       |
|     |              |                      |   |  | \$ <u> </u>                           |
| 21. |              | or pension acc       |   |  |                                       |
|     |              | Interests in IRA, E  | RISA, Keogh, 401(k), 403(b), thrift:    | savings accounts, or other pension or profit-sharing plans           |                                       |
|     | No.          |                      |   |  |                                       |
|     | Yes.         | Describe             | Type of account and Institution         | n name:  |                                       |
|     | _            |                      | 401(k) or similar plan                  | Advocate Health Care   | <b>\$</b> Unknown                     |
|     |              |                      |   |  | <br>\$ 0.00                           |
|     |              |                      |   |  | ą <u>0.0</u> 0                        |
| 22. | =            | eposits and pre      | · ·                                     |  |                                       |
|     |              |                      |   | ay continue service or use from a company                            |                                       |
|     |              | Agreements with it   | andiords, prepaid rent, public utilitie | es (electric, gas, water), telecommunications                        |                                       |
|     | No.          |                      |   |  |                                       |
|     | Yes.         | Describe             | Institution name or individual:         |  |                                       |
|     |              |                      |   |  | \$ 0.00                               |
| 23. | Annuities (  | A contract for a     | periodic payment of money               | to you, either for life or for a number of years)                    |                                       |
|     | No.          |                      |   | ,,   |                                       |
|     | =            |                      |   |  |                                       |
|     | Yes.         | Describe             | Issuer name and description:            |  |                                       |
|     |              |                      |   |  | \$ <u> </u>                           |
| 24. | Interests in | n an education l     | RA, in an account in a qualifie         | ed ABLE program, or under a qualified state tuition program.         |                                       |
|     | 26 U.S.C. §  | § 530(b)(1), 529A    | (b), and 529(b)(1).                     |  |                                       |
|     | No.          |                      |   |  |                                       |
|     | Yes.         | Describe             | Institution name and description        | on. Separately file the records of any interests.11 U.S.C. § 521(c): |                                       |
|     | res.         | Describe             | montation name and description          | on departicly life the records of any interests. IT 0.0.0. § 021(0). | \$ 0.00                               |
|     |              | W. I. I              |   | Lance de la Paris II a Paris Al carda la Lance                       | \$0. <u>0</u> 0                       |
| 25. | irusts, equ  | litable or future    | interests in property (other t          | han anything listed in line 1), and rights or powers                 |                                       |
|     | No.          |                      |   |  |                                       |
|     | Yes.         | Describe             |   |  |                                       |
|     | _            |                      |   |  | \$ 0.00                               |
| 26  | Patents co   | nvrights trade       | marks, trade secrets, and oth           | er intellectual property   | · · · · · · · · · · · · · · · · · · · |
| -0. |              |                      | ames, websites, proceeds from roya      |  |                                       |
|     | No.          | memor domain ne      | anico, websiteo, procede nom roye       | and nothing agreements   |                                       |
|     | NO.          |                      |   |  |                                       |
|     | Yes.         | Describe             |   |  |                                       |
|     |              |                      |   |  | \$ <u>0.0</u> 0                       |
| 27. | Licenses, f  | ranchises, and       | other general intangibles               |  |                                       |
|     | Examples:    | Building permits, e  | exclusive licenses, cooperative asso    | ociation holdings, liquor licenses, professional licenses            |                                       |
|     | No.          |                      |   |  |                                       |
|     | <b>=</b> .,  | Dogorita             |   |  |                                       |
|     | Yes.         | Describe             |   |  |                                       |
|     |              |                      |   |  | \$0. <u>0</u> 0                       |

Schedule A/B: Property

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| Моі | ney or prop               | erty owed to yo                          | u?  | Current value of the portion you own? Do not deduct secured claims or exemptions |
|-----|---------------------------|--|---|--|
| 28. | Tax refund                | s owed to you                            |   |  |
|     | No. Yes.                  | Describe                                 |   | 0.00   |
| 29. | Family sup<br>Examples: I | =  | um alimony, spousal support, child support, maintenance, divorce settlement, property settlement  | \$0.00   |
|     | Yes.                      | Describe                                 |   | s 0.00   |
| 30. | Other amo                 | unts someone o                           | owes you  | •  |
|     |                           |  | ability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation,<br>d loans you made to someone else               |  |
|     | Yes.                      | Describe                                 |   | \$0.00   |
| 31. |                           | insurance polic<br>Health, disability, o | ies r life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Company Name & Beneficiary:                        |  |
|     | Yes.                      | Describe                                 | Term Life Insurance \$0   | \$ 0.00  |
| 32. | If you are th             |  | at is due you from someone who has died living trust, expect proceeds from a life insurance policy, or are currently entitled to receive as died. | <u>,                                    </u>                                     |
|     | Yes.                      | Describe                                 |   | \$0.00   |
| 33. | _                         | -  | s, whether or not you have filed a lawsuit or made a demand for payment ment disputes, insurance claims, or rights to sue                         |  |
|     | Yes.                      | Describe                                 |   | \$0.00   |
| 34. | Other cont                | ingent and unlic                         | quidated claims of every nature, including counterclaims of the debtor and rights   |  |
|     | Yes.                      | Describe                                 |   | \$0.00   |
| 35. | Any financ<br>No.         | ial assets you d                         | id not already list   |  |
|     | Yes.                      | Describe                                 |   | \$ <u> </u>  |
| 36. | Add the do                | llar value of all                        | of your entries from Part 4, including any entries for pages you have attached  | \$40.00  |
|     | for Part 4. V             | Vrite that number                        | er here>  | \$10.00  |
| P   | art 5: D                  | escribe Any Bus                          | iness-Related Property You Own or Have an Interest In. List any real estate in Part 1.  |  |
| 37. | No.                       | n or have any le                         | gal or equitable interest in any business-related property?   |  |
|     | Yes.                      |  |   | Current value of the   |
|     |                           |  |   | portion you own?  Do not deduct secured claims or exemptions                     |
| 38. | Accounts r                | eceivable or co                          | mmissions you already earned  |  |
|     | Yes.                      | Describe                                 |   | \$0.00   |

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First Name Middle Name

Desc Main

| 39. Office equipment, furnishings, and supplies  Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  No.   |                      |
|--|----------------------|
| Yes. Describe  | \$0.00               |
| 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade  No.   |                      |
| Yes. Describe  | \$0.00               |
| 41. Inventory No.  |                      |
| Yes. Describe  | \$0.00               |
| 42. Interests in partnerships or joint ventures  |                      |
| No. Name of Entity and Percent of Ownership:  Yes. Describe  |                      |
| 43. Customer lists, mailing lists, or other compilations   | \$0.00               |
| No.  |                      |
| Yes. Describe  | \$0.00               |
| 44. Any business-related property you did not already list  No.  |                      |
| Yes. Describe  | \$ 0.00              |
| 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached   | <u> </u>             |
| for Part 5. Write that number here>  | \$ 0.00              |
| Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.   |                      |
|  |                      |
| If you own or have an interest in farmland, list it in Part 1.   |                      |
| 1f you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.   |                      |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  | \$ 0.00              |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  | \$ <u>0.0</u> 0      |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  | \$0.00               |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  | \$\$\$\$             |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  48. Crops—either growing or harvested   | <u></u>              |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  | \$ 0.00              |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  48. Crops—either growing or harvested  No.  | <u></u>              |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  48. Crops—either growing or harvested  No.  Yes. Describe   | \$ 0.00              |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  48. Crops—either growing or harvested  No.  Yes. Describe  49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  | \$ 0.00              |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  48. Crops—either growing or harvested  No.  Yes. Describe  49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.   | \$0.00<br>\$0        |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  48. Crops—either growing or harvested  No.  Yes. Describe  49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  50. Farm and fishing supplies, chemicals, and feed  | \$0.00<br>\$0        |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish No. Yes. Describe  48. Crops—either growing or harvested No. Yes. Describe  49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe  50. Farm and fishing supplies, chemicals, and feed No. Yes. Describe  51. Any farm- and commercial fishing-related property you did not already list     | \$\$<br>\$\$<br>\$\$ |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  48. Crops—either growing or harvested  No.  Yes. Describe  49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  50. Farm and fishing supplies, chemicals, and feed  No.  Yes. Describe  | \$\$                 |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish No. Yes. Describe  48. Crops—either growing or harvested No. Yes. Describe  49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe  50. Farm and fishing supplies, chemicals, and feed No. Yes. Describe  51. Any farm- and commercial fishing-related property you did not already list No. | \$\$<br>\$\$<br>\$\$ |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish No. Yes. Describe  48. Crops—either growing or harvested No. Yes. Describe  49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe  50. Farm and fishing supplies, chemicals, and feed No. Yes. Describe  51. Any farm- and commercial fishing-related property you did not already list No. | \$\$                 |

Debtor 1

Case 17-05105 Doc 1 Quillita

First Name

Middle Name

Filed 02/22/17 Entered 02/22/17 14:34:30

Document Page 15 of 68 yumber (if known) Desc Main

| Part 7: Describe All Property You Own or Have an Interest in That You Did Not List  | Above       |             |
|---|-------------|-------------|
| 53. Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership  No.  Yes. Describe |             |             |
| Tes. Describe   |             | \$0.00      |
| 54. Add the dollar value of all of your entries from Part 7. Write that number here   | \$0.00      |             |
| Part 8: List the Totals of Each Part of this Form   |             |             |
| 55. Part 1: Total real estate, line 2   |             | \$ 0.00     |
| 56. Part 2: Total vehicles, line 5  | \$ 5,376.00 |             |
| 57. Part 3: Total personal and household items, line 15   | \$ 1,650.00 |             |
| 58. Part 4: Total financial assets, line 36   | \$ 10.00    |             |
| 59. Part 5: Total business-related property, line 45  | \$ 0.00     |             |
| 60. Part 6: Total farm- and fishing-related property, line 52   | \$ 0.00     |             |
| 61. Part 7: Total other property not listed, line 54  | \$ 0.00     |             |
| 62. Total personal property. Add lines 56 through 61  | \$ 7,036.00 | \$ 7,036.00 |
| 63. <b>Total of all property on Schedule A/B.</b> Add line 55 + line 62   |             | \$7,036.00  |

Record # 739466 Official Form 106A/B Schedule A/B: Property Page 6 of 6

| Fill in this in     | nformation to ident  | ify your case:                      |                 |
|---------------------|----------------------|-------------------------------------|-----------------|
| Debtor 1            | Quillita             | Tameka                              | Rayford         |
|                     | First Name           | Middle Name                         | Last Name       |
| Debtor 2            |                      |                                     |                 |
| (Spouse, if filing) | First Name           | Middle Name                         | Last Name       |
| United States       | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ | ILLINOIS(State) |
| Case Number         | r                    |                                     |                 |
| (If known)          |                      |                                     |                 |

# Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. Which set of exc   | emptions are you claiming? Check                                 | k one only, even if your sp          | ouse is filing with you.  |                                      |  |  |
|---|--|--------------------------------------|---|--------------------------------------|--|--|
| You are claiming state and federal nonbankruptcy exemptions . 11 U.S.C. § 522(b)(3) |  |                                      |   |                                      |  |  |
| You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)                          |  |                                      |   |                                      |  |  |
| 2. For any propert  | y you list on <i>Schedule A/B</i> that yo                        | ou claim as exempt, fill in t        | the information below.  |                                      |  |  |
| •   | on of the property and line on hat lists this property           | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption   |  |  |
|   |  | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                      |  |  |
| Brief<br>description:   | 2013 Nissan Sentra with over 90,000 miles                        | \$_ 5,376                            | \$ _ 2,400  | 735 ILCS 5/12-1001(c) - \$2,400.00   |  |  |
| Line from Schedule A/B:   | 03   |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |  |  |
| Brief<br>description:   | Furniture, linens, small appliances, table & chairs, bedroom set | \$_1,000                             | <b></b>   | 735 ILCS 5/12-1001(b) - \$1,000.00   |  |  |
| Line from Schedule A/B:   | 06   |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |  |  |
| Brief description:  | Flat screen TV, computer, printer, music collection, cell phone  | \$ <u>500</u>                        | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$500.00     |  |  |
| Line from Schedule A/B:   | 07   |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |  |  |
| Brief description:  | Everyday clothes, shoes, accessories                             | \$_100                               | <u></u>   | 735 ILCS 5/12-1001(a),(e) - \$100.00 |  |  |
| Line from Schedule A/B:   | 11   |                                      | 100% of fair market value, up to any applicable statutory limit |                                      |  |  |
|   |  |                                      |   |                                      |  |  |
| Official Form 106C  | Record # 739466  | Schedule C: T                        | he Property You Claim as Exempt                                 | Page 1 of 2                          |  |  |

Debtor 1 Quillita First Name

Tameka

Document

Page 17 of 63 Number (if known)

Middle Name

Last Name

|   | Part 2: Additi  | ional Page  |                                      |   |                             |             |
|---|---|---|--------------------------------------|---|-----------------------------|-------------|
|   | Brief description of the property and line on Schedule A/B that lists this property |   | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow    | exemption   |
|   |   |   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                             |             |
|   | Brief description:  | Everyday jewelry, costume jewelry                     | <u>\$</u> 50                         | \$  | 735 ILCS 5/12-1001(b) - \$5 | 0.00        |
|   | Line from Schedule A/B:   | 12  |                                      | 100% of fair market value, up to any applicable statutory limit |                             |             |
|   | Brief description:  | Other financial account, AMEX Prepaid Debit, 10.00    | \$ <u>10</u>                         | \$  | 735 ILCS 5/12-1001(b) - \$1 | 0.00        |
|   | Line from Schedule A/B:   | <u>17</u>   |                                      | 100% of fair market value, up to any applicable statutory limit |                             |             |
|   | Brief description:  | 401(k) or similar plan, Advocate<br>Health Care, 0.00 | \$Unknown                            | \$  | 735 ILCS 5/12-1006 - \$0.00 |             |
|   | Line from Schedule A/B:   | 21  |                                      | 100% of fair market value, up to any applicable statutory limit |                             |             |
| 3 | Are vou claimin   | g a homestead exemption of more                       | than \$155.675?                      |   |                             |             |
|   | (Subject to adjus   | stment on 4/01/16 and every 3 years                   |                                      | or after the date of adjustment .)                              |                             |             |
|   | No.   |   |                                      |   |                             |             |
|   | ✓ Yes. Did you  | acquire the property covered by the                   | exemption within 1,215 day           | ys before you filed this case?                                  |                             |             |
|   | ☐ No  |   |                                      |   |                             |             |
|   | ☐ Yes.  |   |                                      |   |                             |             |
|   |   |   |                                      |   |                             |             |
|   |   |   |                                      |   |                             |             |
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|   |   |   |                                      |   |                             |             |
|   |   |   |                                      |   |                             |             |
|   |   |   |                                      |   |                             |             |
|   |   |   |                                      |   |                             |             |
|   |   |   |                                      |   |                             |             |
|   |   |   |                                      |   |                             |             |
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|   |   |   |                                      |   |                             |             |
|   |   |   |                                      |   |                             |             |
|   |   |   |                                      |   |                             |             |
|   |   |   |                                      |   |                             |             |
|   |   |   |                                      |   |                             |             |
| 0 | fficial Form 106C   | Record # 739466                                       | Schedule C: The                      | Property You Claim as Exempt                                    |                             | Page 2 of 2 |

|   | nformation to ide   | onthly your case.  |  | 8 of 63   |   |  |   |
|---|---|--|--|---|---|--|---|
| Debtor 1  | Quillita  | Tamek  | a Rayford  |   |   |  |   |
|   | First Name  | Middle Name  | Last Name  |   |   |  |   |
| Debtor 2  |   |  |  | _   |   |  |   |
| (Spouse, if filing)   | First Name  | Middle Name  | Last Name  |   |   |  |   |
| United States   | s Bankruptcy Court  | for the : <u>NORTHERN</u>  |  |   |   |  |   |
| Case Numbe  | er  |  | (State)  |   |   | Check if thi                                       | s is an                                   |
| (If known)  |   |  |  |   |   | amended fi   | ling                                      |
| Official F  | orm 106E  | )  |  |   |   |  |   |
|   |   | _  | - Olai Caa d.b.  | . D   |   |  | 1:  |
|   |   |  | e Claims Secured by  |   |   |  |   |
| formation. If   | more space is n   | eeded, copy the Addi<br>me and case number   | ried people are filing together, b<br>tional Page, fill it out, number the<br>(if known)   | e entries, and attach it to th  | nis form. On the top of a                             | ny   |   |
|   |   | ms secured by your p   |  |   |   |  |   |
| _   |   |  |  | Variables and blooming  | amont on this face.                                   |  |   |
|   |   | submit this form to th   | e court with your other schedules.   | You have nothing else to re   | eport on this form.                                   |  |   |
|   |   |  |  |   |   |  |   |
| Yes. F  | ill in all of the info  | rmation below.   |  |   |   |  |   |
|   |   |  |  |   |   |  |   |
| Yes. F  | ill in all of the info  |  |  |   | Column A  | Column A   | Column (                                  |
| Part 1:   | List All Secured  | Claims   | an one secured claim, list the cred  | litor separately  | Column A Amount of claim                              | Column A  Value of collateral                      |   |
| Part 1:  2. List all se   | ecured claims. If   | Claims  a creditor has more the control one creditor has a part of the control of | articular claim, list the other credit   | ors in Part 2.  | Column A  Amount of claim  Do not deduct the          | Value of collateral that supports this             | Unsecure portion                          |
| Part 1:  2. List all se   | ecured claims. If   | Claims  a creditor has more the control one creditor has a part of the control of |  | ors in Part 2.  | Amount of claim                                       | Value of collateral                                | Column C<br>Unsecure<br>portion<br>If any |
| Part 1:  2. List all se for each of As much   | ecured claims. If   | a creditor has more than one creditor has a pene claims in alphabetic  | articular claim, list the other credit   | ors in Part 2.  | Amount of claim  Do not deduct the                    | Value of collateral that supports this             | Unsecure portion                          |
| Part 1:  2. List all se for each of As much   | ecured claims. If<br>claim. If more that<br>as possible, list the   | a creditor has more than one creditor has a pene claims in alphabetic  | articular claim, list the other credit<br>al order according to the creditors  | ors in Part 2. name. cures the claim:   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure portion If any                   |
| 2. List all se for each c As much  Westla  Creditor's   | ecured claims. If<br>claim. If more that<br>as possible, list the   | a creditor has more than one creditor has a pene claims in alphabetic  | articular claim, list the other credit cal order according to the creditors  Describe the property that sec  | ors in Part 2. name. cures the claim:   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure portion If any                   |
| 2. List all se for each c As much  Westla  Creditor's   | ecured claims. If claim. If more that as possible, list that the lake Financial SVC   | a creditor has more than one creditor has a pene claims in alphabetic  | articular claim, list the other credit cal order according to the creditors  Describe the property that sec  | ors in Part 2. name. cures the claim:   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure portion If any                   |
| 2. List all se for each c As much  2.1 Westla  Creditor's 4751 V  | ecured claims. If<br>claim. If more that<br>as possible, list the<br>like Financial SVC<br>Name<br>Vilshire Blvd  | a creditor has more than one creditor has a pene claims in alphabetic  | articular claim, list the other credit cal order according to the creditors  Describe the property that sec  | ors in Part 2. name. cures the claim:   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure portion If any                   |
| 2. List all se for each of As much  Westla  Creditor's 4751 V  Number   | ecured claims. If claim. If more that as possible, list that like Financial SVC is Name Vilshire Blvd Street  | a creditor has more than one creditor has a per claims in alphabetic   | articular claim, list the other credit ral order according to the creditors  Describe the property that see 2013 Nissan Sentra with over   | ors in Part 2. name. cures the claim:   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure portion If any                   |
| 2. List all se for each c As much  2.1 Westla  Creditor's 4751 V Number  Los An   | ecured claims. If claim. If more that as possible, list that like Financial SVC is Name Vilshire Blvd Street  | a creditor has more than one creditor has a pene claims in alphabetic  | articular claim, list the other credit ral order according to the creditors  Describe the property that sec 2013 Nissan Sentra with over As of the date you file, the cla  | ors in Part 2. name. cures the claim:   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure portion If any                   |
| 2. List all se for each of As much  Westla  Creditor's 4751 V  Number   | ecured claims. If claim. If more that as possible, list that like Financial SVC is Name Vilshire Blvd Street  | a creditor has more than one creditor has a per claims in alphabetic   | articular claim, list the other credit cal order according to the creditors  Describe the property that sec 2013 Nissan Sentra with over As of the date you file, the cla  | ors in Part 2. name. cures the claim:   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure portion If any                   |
| 2. List all se for each c As much  2.1 Westla  Creditor's 4751 V Number  Los An City  | ecured claims. If claim. If more that as possible, list that like Financial SVC is Name Vilshire Blvd Street  | a creditor has more the in one creditor has a preclaims in alphabetic common co | articular claim, list the other credit cal order according to the creditors  Describe the property that sec 2013 Nissan Sentra with ove  As of the date you file, the cla  Contingent  Unliquidated  | ors in Part 2. In name.  cures the claim: In 90,000 miles  im is: Check all that apply.   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure portion If any                   |
| 2. List all se for each of As much  2.1 Westlat  Creditor's 4751 V  Number  Los An  City  Who owe                               | ecured claims. If claim. If more that as possible, list the lake Financial SVC Name Vilshire Blvd Street  sthe debt? Checker 1 only                                   | a creditor has more the in one creditor has a preclaims in alphabetic common co | articular claim, list the other credit cal order according to the creditors  Describe the property that sec  2013 Nissan Sentra with over  As of the date you file, the cla  Contingent Unliquidated Disputed  | ors in Part 2.  name.  cures the claim:  r 90,000 miles  im is: Check all that apply.   | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure portion If any                   |
| 2. List all se for each c As much  2.1 Westla  Creditor's 4751 V  Number  Los An  City  Who owe  Debtor                         | ecured claims. If claim. If more that as possible, list the lake Financial SVC shame vilshire Blvd Street  sthe debt? Check 1 only 2 only                             | a creditor has more the in one creditor has a proper claims in alphabetic control of the control | articular claim, list the other credit cal order according to the creditors  Describe the property that see 2013 Nissan Sentra with over As of the date you file, the cla Contingent Unliquidated Disputed  Nature of Lien. Check all that a An agreement you made (succar loan)   | ors in Part 2.  name.  cures the claim:  r 90,000 miles  im is: Check all that apply.  pply.  th as mortgage or secured                         | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure portion If any                   |
| 2.1 List all se for each c As much  2.1 Westla  Creditor's 4751 V  Number  Los An  City  Who owe  Debtor  Debtor                | ecured claims. If claim. If more that as possible, list the lake Financial SVC shame Vilshire Blvd Street  geles  s the debt? Check of any 2 only 1 and Debtor 2 only | a creditor has more the in one creditor has a preclaims in alphabetic case.  CA 90010  State Zip Code one.   | articular claim, list the other credit cal order according to the creditors  Describe the property that sec 2013 Nissan Sentra with over As of the date you file, the cla Contingent Unliquidated Disputed  Nature of Lien. Check all that a An agreement you made (suc car loan)  Statutory lien (such as tax lier                              | ors in Part 2.  name.  cures the claim:  r 90,000 miles  im is: Check all that apply.  pply.  th as mortgage or secured                         | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure portion If any                   |
| 2.1 List all se for each c As much  2.1 Westla  Creditor's 4751 V  Number  Los An  City  Who owe  Debtor  Debtor                | ecured claims. If claim. If more that as possible, list the lake Financial SVC shame vilshire Blvd Street  sthe debt? Check 1 only 2 only                             | a creditor has more the in one creditor has a preclaims in alphabetic case.  CA 90010  State Zip Code one.   | articular claim, list the other credit cal order according to the creditors  Describe the property that sec 2013 Nissan Sentra with over As of the date you file, the cla Contingent Unliquidated Disputed  Nature of Lien. Check all that a An agreement you made (suc car loan)  Statutory lien (such as tax lien Judgment lien from a lawsuit | ors in Part 2.  In name.  cures the claim:  1 90,000 miles  im is: Check all that apply.  pply.  th as mortgage or secured  n, mechanic's lien) | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure portion If any                   |
| 2. List all se for each c As much  2.1 Westla  Creditor's 4751 V  Number  Los An  City  Who owe  Debtor  Debtor  At leas  Check | ecured claims. If claim. If more that as possible, list the lake Financial SVC shame Vilshire Blvd Street  geles  s the debt? Check of any 2 only 1 and Debtor 2 only | a creditor has more the in one creditor has a preclaims in alphabetic case.  CA 90010 State Zip Code one.  | articular claim, list the other credit cal order according to the creditors  Describe the property that sec 2013 Nissan Sentra with over As of the date you file, the cla Contingent Unliquidated Disputed  Nature of Lien. Check all that a An agreement you made (suc car loan)  Statutory lien (such as tax lier                              | ors in Part 2.  In name.  cures the claim:  1 90,000 miles  im is: Check all that apply.  pply.  th as mortgage or secured  n, mechanic's lien) | Amount of claim Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any             |

| Fil                      | ll in this in                             | Caso 17 (<br>formation to identif                                       |                                 | 1 Filad 02/22/17 En  | tered 02/22/17 14:3<br>9 of 63  | 34:30             | Desc Main        |                |
|--------------------------|---|---|---------------------------------|--|---------------------------------|-------------------|------------------|----------------|
| D                        | obtor 1                                   | Quillita  | Tameka                          | Rayford  |                                 |                   |                  |                |
| D                        | ebtor 1                                   | First Name  | Middle Name                     | Last Name  |                                 |                   |                  |                |
| De                       | ebtor 2                                   |   |                                 |  |                                 |                   |                  |                |
| (Sp                      | pouse, if filing)                         | First Name  | Middle Name                     | Last Name  |                                 |                   |                  |                |
| Uı                       | nited States                              | Bankruptcy Court for th   | he: <u>NORTHERN</u> D           | District of ILLINOIS   |                                 |                   |                  |                |
|                          |   |   |                                 | (State)  |                                 |                   | ☐Check if        | this is an     |
|                          | ase Number<br>f known)                    | <u></u>   |                                 |  |                                 |                   | amende           |                |
| ∩ff                      | icial F                                   | orm 106E/F  |                                 |  |                                 |                   |                  | · ·            |
|                          |   |   | _                               |  |                                 |                   |                  | 12/15          |
|                          |   |   |                                 | e Unsecured Claims or creditors with PRIORITY claims and I                             |                                 |                   |                  | 12/13          |
| credit<br>neede<br>op of | tors with p<br>ed, copy th<br>f any addit | partially secured cla<br>ne Part you need, fil<br>tional pages, write y | ims that are listed in          | ,  | ms Secured by Property. If mo   | ore space is      | -                |                |
|                          |   | ditara baya priority  | unacqured alaims a              | goinet you?  |                                 |                   |                  |                |
| 1. L                     | _ `                                       |   | unsecured claims a              | gamst your   |                                 |                   |                  |                |
| L                        |   | to Part 2.  |                                 |  |                                 |                   |                  |                |
|                          | Yes.                                      |   |                                 |  | alaton Bakilla anaditan anadara | h . <b>f</b> lo l | lata. E.a.       |                |
|                          | -   |   |                                 | itor has more than one priority unsecured<br>claim has both priority and nonpriority a | •                               | -                 |                  |                |
|                          |   |   |                                 | aims in alphabetical order according to the  |                                 | -                 | ·                |                |
|                          |   |   | •                               | Part 1. If more than one creditor holds a p  |                                 | ditors in Part    | 3.               |                |
| (                        | roi an exp                                | danation of each type   | e of claim, see the in:         | structions for this form in the instruction b  | ŕ                               | otal claim        | Priority         | Nonpriority    |
|                          | _   |   |                                 |  |                                 |                   | amount           | amount         |
| 2.1                      |   | Department of Rever   | nue                             | Last 4 digits of account number  |                                 | 341.00            | <u>\$ 341.00</u> | \$ <u>0.00</u> |
|                          | Creditor's<br>PO Box                      |   |                                 | When was the debt incurred?  |                                 |                   |                  |                |
|                          | Number                                    | Street  |                                 |  |                                 |                   |                  |                |
|                          |   |   |                                 | As of the date you file, the claim is: Che   | eck all that apply.             |                   |                  |                |
|                          | Oifi                                      | أماما   | II 60704 0044                   | Contingent   |                                 |                   |                  |                |
|                          | Springfi<br>City                          | eid   | IL 62794-9044<br>State Zip Code | Unliquidated   |                                 |                   |                  |                |
|                          |   | the debt? Check one   |                                 | Disputed   |                                 |                   |                  |                |
|                          | Debtor                                    | 1 only  |                                 |  |                                 |                   |                  |                |
|                          | Debtor                                    | 2 only  |                                 | Type of PRIORITY unsecured claim:  |                                 |                   |                  |                |
|                          | Debtor                                    | 1 and Debtor 2 only   |                                 | Domestic support obligations   |                                 |                   |                  |                |
|                          | At least                                  | one of the debtors and  | I another                       | Taxes and certain other debts you owe t  | he government                   |                   |                  |                |
|                          | _   | if this claim relates to  | оа                              |  |                                 |                   |                  |                |
|                          |   | unity debt<br>m subject to offest?                                      |                                 | Claims for death or personal injury while  | you were                        |                   |                  |                |
|                          | No  | in Subject to onest?  |                                 | intoxicated  |                                 |                   |                  |                |
|                          | Yes                                       |   |                                 | Other. Specify   |                                 |                   |                  |                |

Doc 1 Filed 02/22/17 Entered 02/22/17 14:34:30 Desc Main Case 17-05105 Page 20 of 63 Document Quillita Tameka Debtor 1 Your PRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim **Priority** Nonpriority amount amount \$ 878.00 \$ 878.00 \$ 0.00 IRS Priority Debt 2.2 Last 4 digits of account number \_ Creditor's Name 2015 When was the debt incurred? PO Box 7346 Number As of the date you file, the claim is: Check all that apply. Contingent Philadelphia PA 19101 Unliquidated State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Check if this claim relates to a community debt Claims for death or personal injury while you were Is the claim subject to offest? intoxicated No Other. Specify Yes List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. **Total claim** \$ 300.00 Americash 4.1 Last 4 digits of account number \_ Creditor's Name When was the debt incurred? 3200 W. 159th St. Number As of the date you file, the claim is: Check all that apply. Contingent Markham 60426 IL Unliquidated State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another

that you did not report as priority claims

Other. Specify PayDay Loan

Debts to pension or profit-sharing plans, and other similar debts

Check if this claim relates to a community debt

Is the claim subject to offest?

No

Official Form 106E/F

Page 21 of 63 **Document** Quillita Tameka Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, numl   | ber them beginning with 4.4, followed by 4.5, and so forth.       | Total Claim        |
|--|---|--------------------|
| 4.2 AT&T                                       | Last 4 digits of account number                                   | \$ <u>2,000.00</u> |
| Creditor's Name                                | When we the debt in sumed 2                                       |                    |
| PO Box 8212                                    | When was the debt incurred?                                       |                    |
| Number Street                                  |   |                    |
|  | As of the date you file, the claim is: Check all that apply.      |                    |
|  | Contingent  |                    |
|  | 0572-8212 Unliquidated Unliquidated                               |                    |
| City State Zi Who owes the debt? Check one.    | p Code Disputed   |                    |
|  |   |                    |
| Debtor 1 only                                  | Two (NONDRIADITY  |                    |
| Debtor 2 only                                  | Type of NONPRIORITY unsecured claim:  Student loans               |                    |
| Debtor 1 and Debtor 2 only                     |   |                    |
| At least one of the debtors and another        | Obligations arising out of a separation agreement or divorce      |                    |
| Check if this claim relates to a               | that you did not report as priority claims                        |                    |
| community debt Is the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts |                    |
| No   | Other Courts   Hillity Bills/Collular Sonias                      |                    |
| Yes  | Other. Specify Utility Bills/Cellular Service                     |                    |
| 4.3 Capital ONE BANK USA N                     | Last 4 digits of account number NULL                              | <b>\$</b> 698.00   |
| Creditor's Name                                |   | <u>▼</u>           |
| 15000 Capital One Dr                           | When was the debt incurred? 2016-2016                             |                    |
| Number Street                                  |   |                    |
|  | As of the date you file the claim is. Check all that each         |                    |
|  | As of the date you file, the claim is: Check all that apply.      |                    |
| Richmond VA 23                                 | Contingent  |                    |
| City State Zi                                  | p Code Unliquidated   |                    |
| Who owes the debt? Check one.                  | Disputed  |                    |
| Debtor 1 only                                  |   |                    |
| Debtor 2 only                                  | Type of NONPRIORITY unsecured claim:                              |                    |
| Debtor 1 and Debtor 2 only                     | Student loans   |                    |
| At least one of the debtors and another        | Obligations arising out of a separation agreement or divorce      |                    |
| Check if this claim relates to a               | that you did not report as priority claims                        |                    |
| community debt                                 | Debts to pension or profit-sharing plans, and other similar debts |                    |
| Is the claim subject to offest?                |   |                    |
| No   | Other. Specify Credit Card or Credit Use                          |                    |
| Yes  | -   |                    |
| 4.4 Capital ONE BANK USA N                     | Last 4 digits of account number NULL                              | \$ <u>712.00</u>   |
| Creditor's Name                                | When was the debt incurred? 2016-2016                             |                    |
| 15000 Capital One Dr                           | When was the debt incurred? 2016-2016                             |                    |
| Number Street                                  |   |                    |
|  | As of the date you file, the claim is: Check all that apply.      |                    |
| Distance 1                                     | Contingent  |                    |
| Richmond VA 23                                 | Unliquidated  |                    |
| City State Zi Who owes the debt? Check one.    |   |                    |
| Debtor 1 only                                  |   |                    |
| Debtor 2 only                                  | Tune of NONDRIORITY unacquired alaims                             |                    |
| <b> </b>                                       | Type of NONPRIORITY unsecured claim:                              |                    |
| Debtor 1 and Debtor 2 only                     | Student loans   |                    |
| At least one of the debtors and another        | Obligations arising out of a separation agreement or divorce      |                    |
| Check if this claim relates to a               | that you did not report as priority claims                        |                    |
| community debt Is the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts |                    |
| No   | Other. Specify Credit Card or Credit Use                          |                    |
| Yes  | Other. Specify Great Card of Great OSE                            |                    |

Page 22 of 63 Case Number (if known) **Document** Quillita Tameka Debtor 1

Your NONPRIORITY Unsecured Claims - Continuation Page

| After | listing any entries on this page, number them be | ginning with 4.4, followed by 4.5, and   | d so forth.                  | Total Claim      |
|-------|--|--|------------------------------|------------------|
| 4.5   | Central FINL Control                             | Last 4 digits of account number          |                              | \$ <u>221.00</u> |
|       | Creditor's Name                                  |  | 0040 0044                    |                  |
|       | Po Box 66044                                     | When was the debt incurred?              | 2013-2014                    |                  |
|       | Number Street                                    |  |                              |                  |
|       |  | As of the date you file, the claim is:   | Check all that apply.        |                  |
|       |  | Contingent                               |                              |                  |
|       | Anaheim CA 92816                                 | Unliquidated                             |                              |                  |
|       | City State Zip Code                              | Disputed                                 |                              |                  |
|       | Who owes the debt? Check one.                    |  |                              |                  |
|       | Debtor 1 only                                    |  |                              |                  |
|       | Debtor 2 only                                    | Type of NONPRIORITY unsecured cl         | aim:                         |                  |
|       | Debtor 1 and Debtor 2 only                       | Student loans                            |                              |                  |
|       | At least one of the debtors and another          | Obligations arising out of a separation  |                              |                  |
|       | Check if this claim relates to a                 | that you did not report as priority clai |                              |                  |
|       | community debt Is the claim subject to offest?   | Debts to pension or profit-sharing pla   | ans, and other similar debts |                  |
|       | No   | Madical Daht                             |                              |                  |
|       | Yes  | Other. Specify Medical Debt              | <del></del>                  |                  |
| 4.6   | Central FINL Control                             | Last 4 digits of account number          | 1875                         | <b>\$</b> 516.00 |
| 7.0   | Creditor's Name                                  |  | <del></del>                  |                  |
|       | Po Box 66044                                     | When was the debt incurred?              | 2014-2014                    |                  |
|       | Number Street                                    |  |                              |                  |
|       |  | As of the date you file, the claim is:   | Check all that apply         |                  |
|       |  | Contingent                               | Oncok all that appry.        |                  |
|       | Anaheim CA 92816                                 | = '                                      |                              |                  |
|       | City State Zip Code                              | Unliquidated                             |                              |                  |
|       | Who owes the debt? Check one.                    | Disputed                                 |                              |                  |
|       | Debtor 1 only                                    |  |                              |                  |
|       | Debtor 2 only                                    | Type of NONPRIORITY unsecured cl         | laim:                        |                  |
|       | Debtor 1 and Debtor 2 only                       | Student loans                            |                              |                  |
|       | At least one of the debtors and another          | Obligations arising out of a separation  | n agreement or divorce       |                  |
|       | Check if this claim relates to a                 | that you did not report as priority clai | ms                           |                  |
|       | community debt                                   | Debts to pension or profit-sharing pla   | ans, and other similar debts |                  |
|       | Is the claim subject to offest?                  | <u></u>                                  |                              |                  |
|       | No   | Other. Specify Medical Debt              |                              |                  |
| -     | Liyes City of Chicago Bureau Parking             | Look 4 digita of account growther        |                              | \$ 1,000.00      |
| 4.7   | Creditor's Name                                  | Last 4 digits of account number          | <del></del>                  | Ψ_1,000.00       |
|       | 121 N. LaSalle St                                | When was the debt incurred?              |                              |                  |
|       | Number Street                                    |  |                              |                  |
|       | Room 107   | A a of the plate way file the plains in  | Ohaali all that anali.       |                  |
|       |  | As of the date you file, the claim is:   | Спеск ан тлат арргу.         |                  |
|       | Chicago IL 60602                                 | Contingent                               |                              |                  |
|       | City State Zip Code                              | Unliquidated                             |                              |                  |
|       | Who owes the debt? Check one.                    | Disputed                                 |                              |                  |
|       | Debtor 1 only                                    |  |                              |                  |
|       | Debtor 2 only                                    | Type of NONPRIORITY unsecured cl         | aim:                         |                  |
|       | Debtor 1 and Debtor 2 only                       | Student loans                            |                              |                  |
|       | At least one of the debtors and another          | Obligations arising out of a separation  | n agreement or divorce       |                  |
|       | Check if this claim relates to a                 | that you did not report as priority clai | ms                           |                  |
|       | community debt                                   | Debts to pension or profit-sharing pla   | ans, and other similar debts |                  |
|       | Is the claim subject to offest?                  | <u>_</u>                                 |                              |                  |
|       | No   | Other. Specify Debt Owed                 |                              |                  |
|       | Yes  |  |                              |                  |

Debtor 1 Quillita Tameka Document Page 23 of 63 Case Number (if known)

| Pa    | Your NONPRIORITY Unsecured Claims - 0              | Continuation Page  |                  |
|-------|--|--|------------------|
| After | listing any entries on this page, number them I    | peginning with 4.4, followed by 4.5, and so forth.   | Total Claim      |
| 4.8   | Comcast Cable                                      | Last 4 digits of account number  | \$ <u>700.00</u> |
|       | Creditor's Name                                    |  |                  |
|       | 1701 John F. Kennedy Blvd                          | When was the debt incurred?  |                  |
|       | Number Street                                      |  |                  |
|       |  | As of the date you file, the claim is: Check all that apply.   |                  |
|       | Dhile deletie                                      | Contingent   |                  |
|       | Philadelphia PA 19103                              | Unliquidated   |                  |
|       | City State Zip Code Who owes the debt? Check one.  | Disputed   |                  |
|       | Debtor 1 only                                      | <del>-</del>   |                  |
|       | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:   |                  |
|       | Debtor 1 and Debtor 2 only                         | Student loans  |                  |
|       | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce   |                  |
|       | Check if this claim relates to a                   | that you did not report as priority claims   |                  |
|       | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts  |                  |
|       | Is the claim subject to offest?                    |  |                  |
|       | No   | Other. Specify Cable Bill  |                  |
|       | Yes Commonwealth Edison                            |  | <b>\$</b> 500.00 |
| 4.9   | Creditor's Name                                    | Last 4 digits of account number  | \$ <u>000.00</u> |
|       | 3 Lincoln Center 4th Floor                         | When was the debt incurred?  |                  |
|       | Number Street                                      |  |                  |
|       |  | As of the date over the the delay to Oberland to I   |                  |
|       | <del></del>  | As of the date you file, the claim is: Check all that apply.   |                  |
|       | Oakbrook Terrace IL 60181                          | Contingent   |                  |
|       | City State Zip Code                                | Unliquidated   |                  |
|       | Who owes the debt? Check one.                      | Disputed   |                  |
|       | Debtor 1 only                                      |  |                  |
|       | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:   |                  |
|       | Debtor 1 and Debtor 2 only                         | Student loans  |                  |
|       | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce   |                  |
|       | Check if this claim relates to a                   | that you did not report as priority claims   |                  |
|       | community debt Is the claim subject to offest?     | Debts to pension or profit-sharing plans, and other similar debts  |                  |
|       | No   | I Milita Dilla/Callular Camina   |                  |
|       | Yes  | Other. Specify Utility Bills/Cellular Service  |                  |
| 4.10  | Craditore Discount & A                             | Last 4 digits of account number 9067   | <b>\$</b> 364.00 |
| 1.10  | Creditor's Name                                    | <del></del>  |                  |
|       | 415 E Main St                                      | When was the debt incurred? 2016-2016  |                  |
|       | Number Street                                      |  |                  |
|       |  | As of the date you file, the claim is: Check all that apply.   |                  |
|       |  | Contingent   |                  |
|       | Streator IL 61364                                  | Unliquidated   |                  |
|       | City State Zip Code  Who owes the debt? Check one. | Disputed   |                  |
|       |  |  |                  |
|       | Debtor 1 only                                      | Turn of NONDRIGHTY was sound alsim.  |                  |
|       | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:   |                  |
|       | Debtor 1 and Debtor 2 only                         | Student loans  Obligations arising out of a congration agreement or diverse.                               |                  |
|       | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce<br>that you did not report as priority claims |                  |
|       | Check if this claim relates to a community debt    | Debts to pension or profit-sharing plans, and other similar debts  |                  |
|       | Is the claim subject to offest?                    | Debte to pension of profit-sharing plans, and other similar debts  |                  |
|       | No   | Other. Specify Medical Debt  |                  |
|       | Yes  | Sandi. Opcony  |                  |

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Your NONPRIORITY Unsecured Claims - Continuation Page

| After li | sting any entries on this page, number them be     | ginning with 4.4, followed by 4.5, and  | so forth.                    | Total Claim         |
|----------|--|---|------------------------------|---------------------|
| 4.11     | DEPT OF Defense                                    | Last 4 digits of account number   | 4599                         | <b>\$</b> 44,918.00 |
|          | Creditor's Name                                    |   | 2042 2046                    |                     |
|          | 8899 E 56Th St                                     | When was the debt incurred?   | 2012-2016                    |                     |
|          | Number Street                                      |   |                              |                     |
|          |  | As of the date you file, the claim is:  | Check all that apply.        |                     |
|          |  | Contingent  |                              |                     |
|          | Indianapolis IN 46249                              | Unliquidated  |                              |                     |
|          | City State Zip Code  Who owes the debt? Check one. | Disputed  |                              |                     |
| ľ        |  |   |                              |                     |
|          | Debtor 1 only  Debtor 2 only                       | T ( NONDRIODITY d. al. al.  |                              |                     |
|          | <b>=</b>   | Type of NONPRIORITY unsecured class   | aim:                         |                     |
|          | Debtor 1 and Debtor 2 only                         | <b>=</b>  | a care amont or diverse      |                     |
|          | At least one of the debtors and another            | Obligations arising out of a separation   | -                            |                     |
| L        | Check if this claim relates to a community debt    | that you did not report as priority clair  Debts to pension or profit-sharing pla |                              |                     |
|          | s the claim subject to offest?                     | Debts to pension or profit-sharing pla  | ris, and other similar debts |                     |
| Ï        | No   | Other Specify   |                              |                     |
| Ī        | Yes  | Other. Specify  |                              |                     |
| 4.12     | Devon Financial Services                           | Last 4 digits of account number   |                              | <u>\$ 200.00</u>    |
|          | Creditor's Name                                    |   |                              |                     |
|          | 9455 S. Ashland Ave.                               | When was the debt incurred?   |                              |                     |
|          | Number Street                                      |   |                              |                     |
|          |  | As of the date you file, the claim is:  | Check all that apply.        |                     |
|          |  | Contingent  |                              |                     |
|          | Chicago IL 60620                                   | Unliquidated  |                              |                     |
|          | City State Zip Code                                | Disputed  |                              |                     |
| Y        | Vho owes the debt? Check one.                      |   |                              |                     |
| <u> </u> | Debtor 1 only                                      |   |                              |                     |
| <u> </u> | Debtor 2 only                                      | Type of NONPRIORITY unsecured cla   | aim:                         |                     |
| <u> </u> | Debtor 1 and Debtor 2 only                         | Student loans   |                              |                     |
| L        | At least one of the debtors and another            | Obligations arising out of a separation   | n agreement or divorce       |                     |
|          | Check if this claim relates to a                   | that you did not report as priority clair   | ns                           |                     |
| ١.       | community debt                                     | Debts to pension or profit-sharing pla  | ns, and other similar debts  |                     |
|          | s the claim subject to offest?                     |   |                              |                     |
|          | ■No<br>¬   | Other. Specify PayDay Loan  |                              |                     |
| 1 10     | Yes Falls Collection SVC                           | Look 4 digits of account number   | 2501                         | \$ 82.00            |
| 4.13     | Creditor's Name                                    | Last 4 digits of account number   |                              | \$ <u>02.00</u>     |
|          | Po Box 668   | When was the debt incurred?   | 2016-2016                    |                     |
|          | Number Street                                      |   |                              |                     |
|          | Names.   |   |                              |                     |
|          |  | As of the date you file, the claim is:  | Check all that apply.        |                     |
|          | Germantown WI 53022                                | Contingent  |                              |                     |
|          | City State Zip Code                                | Unliquidated  |                              |                     |
| v        | Who owes the debt? Check one.                      | Disputed  |                              |                     |
|          | Debtor 1 only                                      |   |                              |                     |
| [        | Debtor 2 only                                      | Type of NONPRIORITY unsecured cla   | aim:                         |                     |
| [        | Debtor 1 and Debtor 2 only                         | Student loans   |                              |                     |
|          | At least one of the debtors and another            | Obligations arising out of a separation   | n agreement or divorce       |                     |
|          | Check if this claim relates to a                   | that you did not report as priority clair   | -                            |                     |
|          | community debt                                     | Debts to pension or profit-sharing pla  |                              |                     |
| ls ls    | the claim subject to offest?                       |   |                              |                     |
|          | No   | Other. Specify Medical Debt   |                              |                     |
|          | Yes  |   |                              |                     |

Debtor 1 Quillita Tameka Document Page 25 of 63 Case Number (if known)

Your NONPRIORITY Unsecured Claims - Continuation Page

| After lis | sting any entries on this page, number them be     | ginning with 4.4, followed by 4.5, and s  | o forth.                  | Total Claim         |
|-----------|--|---|---------------------------|---------------------|
| 4.14      | FED LOAN SERV                                      | Last 4 digits of account number   | 0004                      | \$ <u>893.00</u>    |
|           | Creditor's Name                                    |   | 2040 2047                 |                     |
|           | Po Box 60610                                       | When was the debt incurred?   | 2016-2017                 |                     |
|           | Number Street                                      |   |                           |                     |
|           |  | As of the date you file, the claim is: Ch   | eck all that apply.       |                     |
|           |  | Contingent  |                           |                     |
|           | Harrisburg PA 17106                                | Unliquidated  |                           |                     |
| ١.,       | City State Zip Code  Who owes the debt? Check one. | Disputed  |                           |                     |
| "         |  |   |                           |                     |
|           | Debtor 1 only                                      | To a CNONDRIODITY   |                           |                     |
|           | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim  Student loans                                    | n:                        |                     |
|           | Debtor 1 and Debtor 2 only                         | =   | areament or diverse       |                     |
|           | At least one of the debtors and another            | Obligations arising out of a separation a   | greement of divorce       |                     |
| 4         | Check if this claim relates to a community debt    | that you did not report as priority claims  Debts to pension or profit-sharing plans, | and other similar debte   |                     |
| ls        | s the claim subject to offest?                     | Debts to pension or profit-sharing plans,   | , and other similar debts |                     |
| ì         | No   | Other. Specify  |                           |                     |
| Ī         | Yes  | Other. Specify  |                           |                     |
| 4.15      | FED LOAN SERV                                      | Last 4 digits of account number   | 0003                      | <b>\$</b> 1,625.00  |
|           | Creditor's Name                                    |   |                           |                     |
|           | Po Box 60610                                       | When was the debt incurred?   | 2016-2017                 |                     |
|           | Number Street                                      |   |                           |                     |
|           |  | As of the date you file, the claim is: Ch   | eck all that apply.       |                     |
|           |  | Contingent  |                           |                     |
|           | Harrisburg PA 17106                                | Unliquidated  |                           |                     |
|           | City State Zip Code                                | Disputed  |                           |                     |
| Y         | Vho owes the debt? Check one.                      | Disputed  |                           |                     |
|           | Debtor 1 only                                      |   |                           |                     |
|           | Debtor 2 only                                      | Type of NONPRIORITY unsecured clain   | n:                        |                     |
|           | Debtor 1 and Debtor 2 only                         | Student loans   |                           |                     |
|           | At least one of the debtors and another            | Obligations arising out of a separation a   |                           |                     |
| L         | Check if this claim relates to a                   | that you did not report as priority claims  |                           |                     |
|           | community debt                                     | Debts to pension or profit-sharing plans,   | , and other similar debts |                     |
|           | s the claim subject to offest?                     |   |                           |                     |
| 1 7       | Yes  | Other. Specify  |                           |                     |
| 1 16      | FED LOAN SERV                                      | Last 4 digits of account number   | 0001                      | <b>\$</b> 43,101.00 |
| 4.16      | Creditor's Name                                    | Last 4 digits of account manifer  | <del></del> _             | ·                   |
|           | Po Box 60610                                       | When was the debt incurred?   | 2015-2017                 |                     |
|           | Number Street                                      |   |                           |                     |
|           |  | As of the date you file, the claim is: Ch   | ack all that apply        |                     |
|           |  | Contingent  | eck all that appry.       |                     |
|           | Harrisburg PA 17106                                | = '   |                           |                     |
|           | City State Zip Code                                | Unliquidated  |                           |                     |
| <u> </u>  | Who owes the debt? Check one.                      | Disputed  |                           |                     |
|           | Debtor 1 only                                      |   |                           |                     |
| [         | Debtor 2 only                                      | Type of NONPRIORITY unsecured clain   | n:                        |                     |
| [         | Debtor 1 and Debtor 2 only                         | Student loans   |                           |                     |
|           | At least one of the debtors and another            | Obligations arising out of a separation a   | greement or divorce       |                     |
| Γ         | Check if this claim relates to a                   | that you did not report as priority claims  |                           |                     |
|           | community debt                                     | Debts to pension or profit-sharing plans,   | , and other similar debts |                     |
| ls        | s the claim subject to offest?                     |   |                           |                     |
|           | No   | Other. Specify  |                           |                     |
|           | Yes  |   |                           |                     |

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Page 26 of 63 Case Number (if known) **Document** Quillita Tameka Debtor 1

Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** First Commerce CU \$ 5,684.00 Last 4 digits of account number \_ Creditor's Name 2010-10-27 2330 Mahan Dr When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 32308 Tallahassee Unliquidated City State Zip Code Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify \_ Yes HOPE Federal Credit UN \$ 85.00 Last 4 digits of account number 4.18 2013-2013 350 W Woodrow Wilson Ave When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 39213 Jackson MS Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify \_\_\_Unknown Credit Extension Yes Illinois Collection SE 4717 \$ 54.00 4.19 Last 4 digits of account number Creditor's Name 2016-2017 8231 185Th St Ste 100 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Tinley Park 60487 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Medical Debt Other. Specify \_\_

Debtor 1 Quillita Tameka Document Page 27 of 63
Case Number (if known)

| Par      | Your NONPRIORITY Unsecured Claims - C              | Continuation Page                              |                               |                  |
|----------|--|--|-------------------------------|------------------|
| After li | sting any entries on this page, number them b      | eginning with 4.4, followed by 4.5, ar         | nd so forth.                  | Total Claim      |
| 4.20     | Navient Solutions INC                              | Last 4 digits of account number                | 1014                          | \$ <u>0.00</u>   |
|          | Creditor's Name                                    |  | 2009-2010                     |                  |
|          | 11100 Usa Pkwy                                     | When was the debt incurred?                    | 2009-2010                     |                  |
|          | Number Street                                      |  |                               |                  |
|          |  | As of the date you file, the claim is:         | : Check all that apply.       |                  |
|          | Fishers IN 46037                                   | Contingent                                     |                               |                  |
|          | City State Zip Code                                | Unliquidated                                   |                               |                  |
| V        | Who owes the debt? Check one.                      | Disputed                                       |                               |                  |
|          | Debtor 1 only                                      |  |                               |                  |
| [        | Debtor 2 only                                      | Type of NONPRIORITY unsecured of               | claim:                        |                  |
|          | Debtor 1 and Debtor 2 only                         | Student loans                                  |                               |                  |
|          | At least one of the debtors and another            | Obligations arising out of a separati          | ion agreement or divorce      |                  |
|          | Check if this claim relates to a                   | that you did not report as priority cla        | aims                          |                  |
|          | community debt                                     | Debts to pension or profit-sharing p           | lans, and other similar debts |                  |
| "        | s the claim subject to offest?                     |  |                               |                  |
|          | No<br>Yes  | Other. Specify                                 |                               |                  |
| 4.21     | Navient Solutions INC                              | Last 4 digits of account number                | 1216                          | <b>\$</b> 0.00   |
| 7.21     | Creditor's Name                                    |  | <del></del>                   | · <del></del>    |
|          | 11100 Usa Pkwy                                     | When was the debt incurred?                    | 2009-2010                     |                  |
|          | Number Street                                      |  |                               |                  |
|          |  | As of the date you file, the claim is:         | : Check all that apply.       |                  |
|          |  | Contingent                                     |                               |                  |
|          | Fishers IN 46037                                   | Unliquidated                                   |                               |                  |
| \ v      | City State Zip Code  Who owes the debt? Check one. | Disputed                                       |                               |                  |
| i        | Debtor 1 only                                      |  |                               |                  |
| l i      | Debtor 2 only                                      | Type of NONPRIORITY unsecured (                | claim:                        |                  |
| l i      | Debtor 1 and Debtor 2 only                         | Student loans                                  |                               |                  |
| l i      | At least one of the debtors and another            | Obligations arising out of a separati          | ion agreement or divorce      |                  |
| 1        | Check if this claim relates to a                   | that you did not report as priority cla        |                               |                  |
| '        | community debt                                     | Debts to pension or profit-sharing p           | lans, and other similar debts |                  |
| l:       | s the claim subject to offest?                     |  |                               |                  |
|          | No   | Other. Specify                                 |                               |                  |
|          | Yes Nutribullet LLC                                | Land A Marka of a count number                 | 63N1                          | <b>\$</b> 101.00 |
| 4.22     | Creditor's Name                                    | Last 4 digits of account number                |                               | \$ <u>101.00</u> |
|          | 8550 Balboa Blvd Ste 232                           | When was the debt incurred?                    | 2014-2014                     |                  |
|          | Number Street                                      |  |                               |                  |
|          |  | As of the date you file, the claim is:         | Check all that apply          |                  |
|          |  | Contingent                                     | officer all that apply.       |                  |
|          | Northridge CA 91325                                | Unliquidated                                   |                               |                  |
| ١.,      | City State Zip Code                                | Disputed                                       |                               |                  |
| ľ        | Who owes the debt? Check one.                      |  |                               |                  |
|          | Debtor 1 only                                      | Towns of NONDRIORITY owns sound                | alaim.                        |                  |
|          | Debtor 2 only  Debtor 1 and Debtor 2 only          | Type of NONPRIORITY unsecured of Student loans | Ciaiiii.                      |                  |
|          | At least one of the debtors and another            | Obligations arising out of a separati          | ion agreement or divorce      |                  |
|          | =  | that you did not report as priority cla        |                               |                  |
|          | Check if this claim relates to a community debt    | Debts to pension or profit-sharing p           |                               |                  |
| l:       | s the claim subject to offest?                     |  | 2.00                          |                  |
|          | No   | Other. Specify Collecting for C                | Creditor                      |                  |
| [        | Yes  |  |                               |                  |

Page 28 of 63 Case Number (if known) **Document** Quillita Tameka Debtor 1

Your NONPRIORITY Unsecured Claims - Continuation Page

| After I | listing any entries on this page, number them b | reginning with 4.4, followed by 4.5, and so forth.                | Total Claim         |
|---------|---|---|---------------------|
|         | 1 December Con                                  |   | <b>↑</b> E1E 00     |
| 4.23    | Peoples Gas                                     | Last 4 digits of account number                                   | \$ <u>515.00</u>    |
|         | Creditor's Name 200 E. Randolph Dr.             | When was the debt incurred?                                       |                     |
|         | Number Street                                   |   |                     |
|         |   | As of the date was file the state to Ot at all the trail          |                     |
|         |   | As of the date you file, the claim is: Check all that apply.      |                     |
|         | Chicago IL 60601                                | ☐ Contingent  |                     |
|         | City State Zip Code                             | Unliquidated  |                     |
| '       | Who owes the debt? Check one.                   | Disputed  |                     |
|         | Debtor 1 only                                   |   |                     |
|         | Debtor 2 only                                   | Type of NONPRIORITY unsecured claim:                              |                     |
|         | Debtor 1 and Debtor 2 only                      | Student loans   |                     |
|         | At least one of the debtors and another         | Obligations arising out of a separation agreement or divorce      |                     |
|         | Check if this claim relates to a                | that you did not report as priority claims                        |                     |
|         | community debt                                  | Debts to pension or profit-sharing plans, and other similar debts |                     |
|         | Is the claim subject to offest?                 |   |                     |
|         | ■ No<br>□                                       | Other. SpecifyUtility Bills/Cellular Service                      |                     |
| 4.04    | SAFCO   | Last 4 digits of account number 7601                              | <b>\$</b> 8,026.00  |
| 4.24    | Creditor's Name                                 | Last 4 digits of account number 7001                              | <b>\$</b> _0,020.00 |
|         | 5900 Lake Ellenor Dr                            | When was the debt incurred? 2015-09-10                            |                     |
|         | Number Street                                   |   |                     |
|         |   |   |                     |
|         |   | As of the date you file, the claim is: Check all that apply.      |                     |
|         | Orlando FL 32809                                | Contingent  |                     |
|         | City State Zip Code                             | Unliquidated  |                     |
| '       | Who owes the debt? Check one.                   | Disputed  |                     |
|         | Debtor 1 only                                   |   |                     |
|         | Debtor 2 only                                   | Type of NONPRIORITY unsecured claim:                              |                     |
|         | Debtor 1 and Debtor 2 only                      | Student loans   |                     |
|         | At least one of the debtors and another         | Obligations arising out of a separation agreement or divorce      |                     |
|         | Check if this claim relates to a                | that you did not report as priority claims                        |                     |
|         | community debt                                  | Debts to pension or profit-sharing plans, and other similar debts |                     |
|         | Is the claim subject to offest?                 |   |                     |
|         | No  | Other. Specify  |                     |
| _       | Yes   | 4040  | * E00 00            |
| 4.25    | Speedycash.Com 164-Tn                           | Last 4 digits of account number4942                               | \$ <u>500.00</u>    |
|         | Creditor's Name<br>7330 W 33Rd St N Ste 118     | When was the debt incurred? 2014-2014                             |                     |
|         |   | Their was the dest incurred:                                      |                     |
|         | Number Street                                   |   |                     |
|         |   | As of the date you file, the claim is: Check all that apply.      |                     |
|         | Wichita KS 67205                                | Contingent  |                     |
|         | City State Zip Code                             | Unliquidated  |                     |
| '       | Who owes the debt? Check one.                   | Disputed  |                     |
|         | Debtor 1 only                                   |   |                     |
|         | Debtor 2 only                                   | Type of NONPRIORITY unsecured claim:                              |                     |
|         | Debtor 1 and Debtor 2 only                      | Student loans   |                     |
|         | At least one of the debtors and another         | Obligations arising out of a separation agreement or divorce      |                     |
|         | Check if this claim relates to a                | that you did not report as priority claims                        |                     |
|         | community debt                                  | Debts to pension or profit-sharing plans, and other similar debts |                     |
|         | Is the claim subject to offest?                 | <u> </u>  |                     |
|         | No  | Other. Specify Collecting for Creditor                            |                     |
|         | Yes   |   |                     |

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| ting any entries on this page, number them        | beginning with 4.4, followed by 4.5, ar | nd so forth.                   | Total Clai         |
|---|---|--------------------------------|--------------------|
| T-Mobile  | Last 4 digits of account number _       | 4905                           | <b>\$</b> _1,696.0 |
| Creditor's Name                                   | When we she dold in sum d2              | 2016-2016                      |                    |
| 4120 International Pkwy  Number Street            | When was the debt incurred?             |                                |                    |
| Number Street                                     |   |                                |                    |
|   | As of the date you file, the claim is:  | : Check all that apply.        |                    |
| Carrollton TX 75007                               | Contingent                              |                                |                    |
| City State Zip Code                               | Unliquidated                            |                                |                    |
| /ho owes the debt? Check one.                     | Disputed                                |                                |                    |
| Debtor 1 only                                     |   |                                |                    |
| Debtor 2 only                                     | Type of NONPRIORITY unsecured           | claim:                         |                    |
| Debtor 1 and Debtor 2 only                        | Student loans                           |                                |                    |
| At least one of the debtors and another           | Obligations arising out of a separat    | ion agreement or divorce       |                    |
| Check if this claim relates to a                  | that you did not report as priority cla | ·                              |                    |
| community debt                                    | Debts to pension or profit-sharing p    |                                |                    |
| the claim subject to offest?                      |   |                                |                    |
| No  | Other, Specify Collecting for C         | Creditor                       |                    |
| Yes   |   |                                |                    |
| Verizon Wireless                                  | Last 4 digits of account number _       | NULL                           | <u>\$ 1,762.0</u>  |
| Creditor's Name                                   |   | 2010-2015                      |                    |
| Po Box 49   | When was the debt incurred?             | 2010-2013                      |                    |
| Number Street                                     |   |                                |                    |
|   | As of the date you file, the claim is   | : Check all that apply.        |                    |
|   | Contingent                              |                                |                    |
| Lakeland FL 33802                                 | Unliquidated                            |                                |                    |
| City State Zip Code /ho owes the debt? Check one. | Disputed                                |                                |                    |
| Debtor 1 only                                     | <b>–</b>                                |                                |                    |
| Debtor 2 only                                     | Towns of NONDRIORITY and assessed       | alaim.                         |                    |
| <b>=</b>  | Type of NONPRIORITY unsecured           | ciaim:                         |                    |
| Debtor 1 and Debtor 2 only                        | <b>=</b>                                | ion agreement or diverse       |                    |
| At least one of the debtors and another           | Obligations arising out of a separat    |                                |                    |
| Check if this claim relates to a                  | that you did not report as priority cla |                                |                    |
| community debt<br>the claim subject to offest?    | Debts to pension or profit-sharing p    | naris, and other similar debts |                    |
| No  | Other. Specify Unknown Cred             | it Extension                   |                    |
| Yes   | Other. SpecifyOtherwise Great           | IL LAGISION                    |                    |

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Quillita

Debtor 1

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Schedule E/F: Creditors Who Have Unsecured Claims

**Document** Quillita Tameka Debtor 1

Add the Amounts for Each Type of Unsecured Claim

|                          | nounts of certain types of unsecured claims. This information is foounts for each type of unsecured claim.  | or statistical re | porting purposes only. 28 U.S.C. § 159. |
|--------------------------|---|-------------------|---|
|                          |   |                   | Total claim                             |
| Total claims             | 6a. Domestic support obligations  | 6a.               | \$0.00                                  |
|                          | 6b. Taxes and Certain other debts you owe the government  | 6b.               | \$1,219.00                              |
|                          | 6c. Claims for death or personal injury while you were intoxicated  | 6c.               | \$0.00                                  |
|                          | 6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.                          | 6d.               | \$0.00                                  |
|                          | 6e. <b>Total.</b> Add lines 6a through 6d.  | 6e.               | \$1,219.00                              |
|                          |   |                   | Total claim                             |
| Total claims from Part 2 | 6f. Student loans   | 6f.               | \$90,537.00                             |
|                          | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g.               | \$0.00                                  |
|                          | 6h. Debts to pension or profit-sharing plans, and other similar debts                                       | 6h.               | \$0.00                                  |
|                          | 6i. <b>Other.</b> Add all other nonpriority unsecured claims.  Write that amount here.                      | 6i.               | \$                                      |
|                          | 6j. <b>Total.</b> Add lines 6f through 6i.  | 6j.               | \$116,253.00                            |

|                          |   | Caso 17   | 7.05105 Doc 1 E  | ilad 02/22/17  | Entered 02/22/17 14:34:3  | 0 Desc Main         |
|--------------------------|---|---|--|--|---|---------------------|
| Fi                       | ll in this in                                 | formation to ide  |  |  | 1 of 63   |                     |
| D                        | ebtor 1                                       | Quillita  | Tameka   | Rayford  |   |                     |
| D                        | ebtor 2                                       | First Name  | Middle Name  | Last Name  |   |                     |
|                          | pouse, if filing)                             | First Name  | Middle Name  | Last Name  |   |                     |
| U                        | nited States                                  | Bankruptcy Court fo   | or the : <u>NORTHERN</u> District of <u>IL</u>   |  |   |                     |
|                          | ase Number                                    |   |  | (State)  |   | Check if this is an |
|                          | f known)                                      | 4000  |  |  |   | amended filing      |
|                          |   | orm 106G  | •  |  |   | 12/1                |
| Be as<br>nforr<br>additi | complete mation. If n ional page:  Oo you hav | and accurate as<br>nore space is ne<br>s, write your nan<br>e any executory<br>eck this box and | eded, copy the additional page, to<br>ne and case number (if known).<br>contracts or unexpired leases?<br>submit this form to the court with y | are filing together, bot<br>ill it out, number the en<br>your other schedules. You | n are equally responsible for supplying contries, and attach it to this page. On the top but have nothing else to report on this form.  Schedule A/B: Property (Official Form 106A/E) | rect<br>of any      |
| е                        | ist separat                                   | ely each person<br>nt, vehicle lease  | or company with whom you hav   | e the contract or lease  | Then state what each contract or lease is function booklet for more examples of executor  | for (for            |
|                          | Person or                                     | company with w  | rhom you have the contract or le   | ase  | State what the contract or  | lease is for        |
| 2.1                      |   |   |  |  |   |                     |
|                          | Name  |   |  |  |   |                     |
|                          | Number  | Street  |  |  | -   |                     |
|                          | City  |   | State Zip C  | ode  | -   |                     |
| 2.2                      |   |   |  |  |   |                     |
|                          | Name  |   |  |  |   |                     |
|                          | Number  | Street  |  |  | -   |                     |
|                          | City  |   | State Zip C  | ode  | -   |                     |
| 2.3                      |   |   |  |  |   |                     |
|                          | Name  |   |  |  |   |                     |
|                          | Number  | Street  |  |  | -   |                     |
|                          | City  |   | State Zip C  | ode  | -   |                     |
| 2.4                      |   |   |  |  |   |                     |
|                          | Name  |   |  |  |   |                     |
|                          | Number  | Street  |  |  | -   |                     |
|                          | City  |   | State Zip C  | ode  | -   |                     |
| 2.5                      |   |   |  |  |   |                     |
|                          | Name  |   |  |  |   |                     |
|                          | Number  | Street  |  |  | -   |                     |

State Zip Code

City

Official Form 106G

| Fill in this in     | nformation to ident  | tify your case:                     |                 |
|---------------------|----------------------|-------------------------------------|-----------------|
| Debtor 1            | Quillita             | Tameka                              | Rayford         |
|                     | First Name           | Middle Name                         | Last Name       |
| Debtor 2            | -                    |                                     |                 |
| (Spouse, if filing) | First Name           | Middle Name                         | Last Name       |
| United States       | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ | <u>ILLINOIS</u> |
| Case Number         | r                    |                                     | (State)         |
| (If known)          |                      |                                     |                 |

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any A       | dditional Pages, write your name ar   | nd case number (if known). Answ          | er every question.   |   |
|-------------|---|--|----------------------|---|
| 1. <b>D</b> | o you have any codebtors? (If you a   | re filing a joint case, do not list eith | ner spouse as a code | btor.)  |
|             | No.   |  |                      |   |
|             | Yes   |  |                      |   |
|             | lithin the last 8 years, have you liverizona, California, Idaho, Lousiiana, N |  | • ,                  | unity property states and territories include and Wisconsin.) |
|             | No. Go to line 3.   |  |                      |   |
|             | Yes. Did your spouse, former spo  | use, or legal equivalent live with yo    | ou at the time?      |   |
|             |   | e or territory did you live?             | Fill ir              | n the name and current address of that person.                |
|             | Name of your spouse, former spouse or   | legal equivalent                         |                      |   |
|             |   |  |                      |   |
|             | Number Street   |  |                      |   |
|             | City  | State                                    | Zip Code             |   |
| 3           | chedule E/F, or Schedule G to fill ou   | it Column 2.                             |                      | Column 2: The creditor to whom you owe the debt               |
|             |   |  |                      | Check all schedules that apply:                               |
| 3.1         |   |  |                      | Schedule D, line  |
|             | Name  |  |                      | Schedule E/F, line  |
|             | Number Street   |  |                      | Schedule G, line  |
|             | City  | State                                    | Zip Code             |   |
| 3.2         |   |  |                      | Schedule D, line  |
|             | Name  |  |                      | Schedule E/F, line  |
|             | Number Street   |  |                      | Schedule G, line  |
| _           | City  | State                                    | Zip Code             |   |
| 3.3         |   |  |                      | Schedule D, line  |
|             | Name  |  |                      | Schedule E/F, line  |
|             | Number Street   |  |                      | Schedule G, line  |
|             | City  | State                                    | Zip Code             |   |

| Fill in this in     | nformation to ident  |                                  |              | 01 00    |
|---------------------|----------------------|----------------------------------|--------------|----------|
| Debtor 1            | Quillita             | Tameka                           | Rayford      |          |
|                     | First Name           | Middle Name                      | Last Name    |          |
| Debtor 2            |                      |                                  | <del> </del> |          |
| (Spouse, if filing) | First Name           | Middle Name                      | Last Name    |          |
| United States       | Bankruptcy Court for | the : <u>NORTHERN DISTRICT C</u> | PF ILLINOIS  |          |
| Case Number         | r                    |                                  |              | Check if |
| (If known)          |                      |                                  |              | ☐ An a   |
|                     |                      |                                  |              |          |

| Che | ck if this is:                              |
|-----|---|
|     | An amended filing                           |
|     | A supplement showing post-petition          |
|     | chapter 13 income as of the following date: |
|     |   |
|     | MM / DD / YYYY                              |

## Official Form 106I

### **Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Describe Employment  |                          |                         |              |                                   |   |
|----|--|--------------------------|-------------------------|--------------|-----------------------------------|---|
| 1. | Fill in your employment information  |                          | Debtor 1                |              | Debtor 2 or non-filing spouse     |   |
|    | If you have more than one job, attach a separate page with information about additional employers.   | Employment status        | X Employed Not employed | ı            | Employed  Not employed            |   |
|    | Include part-time, seasonal, or self-employed work.  | Occupation               | PCA                     |              |                                   |   |
|    | Occupation may Include student or homemaker, if it applies.  | Employers name           | Advocate Health (       | Care         |                                   |   |
|    |  | Employers address        | 2025 Windsor Dr.        |              |                                   |   |
|    |  |                          | Oak Brook, IL 605       | 23           | ,                                 |   |
|    |  |                          |                         |              |                                   | _ |
|    |  | How long employed there? | Since 10/1/2014         |              | -                                 |   |
| Pa | rt 2: Give Details About Monthly   | y Income                 |                         |              |                                   |   |
|    | Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. |                          |                         |              |                                   |   |
|    |  |                          |                         | For Debtor 1 | For Debtor 2 or non-filing spouse |   |
| 2. | <ol> <li>List monthly gross wages, salary and commissions (before all payroll<br/>deductions). If not paid monthly, calculate what the monthly wage would be.</li> </ol>   |                          |                         | \$2,796.04   | \$0.00                            |   |
| 3. | Estimate and list monthly overting   | ne pay.                  |                         | \$0.00       | \$0.00                            |   |
| 4. | Calculate gross income. Add line   | 2 + line 3.              |                         | \$2,796.04   | \$0.00                            |   |

 Official Form 106I
 Record # 739466
 Schedule I: Your Income
 Page 1 of 2

Document Quillita Tameka Debtor 1 Case Number (if known) First Name Middle Name Last Name

|             |                |   |              | For Debtor 1 |        | r Debtor 2 or<br>n-filing spouse |                       |
|-------------|----------------|---|--------------|--------------|--------|----------------------------------|-----------------------|
|             | Cop            | y line 4 here   | 4.           | \$2,796.04   |        | \$0.00                           |                       |
| 5.          | List all       | payroll deductions:   |              |              |        |                                  |                       |
|             | 5a. 1          | Fax, Medicare, and Social Security deductions   | 5a.<br>_     | \$226.14     | _      | \$0.00                           |                       |
|             | 5b. <b>N</b>   | Mandatory contributions for retirement plans  | 5b.<br>      | \$0.00       |        | \$0.00                           |                       |
|             | 5c. <b>\</b>   | oluntary contributions for retirement plans   | 5c.          | \$0.00       |        | \$0.00                           |                       |
|             | 5d. <b>F</b>   | Required repayments of retirement fund loans  | 5d.          | \$0.00       |        | \$0.00                           |                       |
|             |                | nsurance  | 5e.<br>_     | \$633.64     |        | \$0.00                           |                       |
|             |                | Domestic support obligations  | 5f.<br>—     | \$0.00       | _      | \$0.00                           |                       |
|             | _              | Jnion dues  | 5g.<br>_     | \$0.00       | _      | \$0.00                           |                       |
|             |                | Other deductions. Specify: Life Insurance(D1), Disability(D1),  | 5h.<br>      | \$12.15      |        | \$0.00                           |                       |
|             |                | e payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.  | 6.<br>       | \$871.93     |        | \$0.00                           |                       |
| 7. (        | Calcula        | te total monthly take-home pay. Subtract line 6 from line 4.  | 7.           | \$1,924.11   |        | \$0.00                           |                       |
| 8. <b>I</b> | ist all        | other income regularly received:  |              | _            |        |                                  |                       |
|             | 8a.            | Net income from rental property and from operating a business,  |              |              |        |                                  |                       |
|             |                | profession, or farm   |              |              |        |                                  |                       |
|             |                | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total   |              |              |        |                                  |                       |
|             |                | monthly net income.   | 8a.          | \$0.00       |        | \$0.00                           |                       |
|             | 8b.            | Interest and dividends  | 8b.          | \$0.00       |        | \$0.00                           |                       |
|             | 8c.            | Family support payments that you, a non-filing spouse, or a dependent regularly receive   | 8c.          | \$ 0.00      |        | \$ 0.00                          |                       |
|             |                | Include alimony, spousal support, child support, maintenance, divorce   |              |              |        |                                  |                       |
|             |                | settlement, and property settlement.  |              |              |        |                                  |                       |
|             | 8d.            | Unemployment compensation   | 8d.          | \$0.00       |        | \$0.00                           |                       |
|             | 8e.            | Social Security   | 8e.          | \$0.00       |        | \$0.00                           |                       |
|             | 8f.            | Other government assistance that you regularly receive  | 8f.          | \$0.00       |        | \$0.00                           |                       |
|             |                | Include cash assistance and the value (if known) of any non-cash  |              | ·            |        |                                  |                       |
|             |                | assistance that you receive, such as food stamps (benefits under the  |              |              |        |                                  |                       |
|             |                | Supplemental Nutrition Assistance Program) or housing subsidies.  |              |              |        |                                  |                       |
|             |                | Specify:  |              |              |        |                                  |                       |
|             | 8g.            | Pension or retirement income  | 8g.          | \$0.00       |        | \$0.00                           |                       |
|             | 8h.            | Other monthly income. Specify:  | 8h.          | \$0.00       |        | \$0.00                           |                       |
| 9.          | Add            | <b>all other income</b> . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.   | 9.           | \$0.00       |        | \$0.00                           |                       |
| 10.         | Calc           | ulate monthly income. Add line 7 + line 9.  | 10.          | \$1,924.11   |        | \$0.00                           | \$1,924.11            |
|             | Add            | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | L            | ¥ 1,4= 1111  |        | 40.00                            | ¥ 1,02 11 1           |
| 11.         | Incluothe Do n | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, you refriends or relatives.  Tot include any amounts already included in lines 2-10 or amounts that are residue. | our dependen |              |        |                                  | ¢0.00                 |
|             | Spec           | лу  |              |              |        | 1                                | 1. \$0.00             |
| 12.         |                | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Ce   |              | •            | applie | s 1                              | 12. <b>\$1,924.11</b> |
| 13.         | Do y           | ou expect an increase or decrease within the year after you file this form  | 1?           |              |        |                                  |                       |
|             | х              |   |              |              |        |                                  |                       |
|             |                | Yes. Explain:   |              |              |        |                                  |                       |
|             |                |   |              |              |        |                                  |                       |

| Filli   | n this in               | formation to identify yo  | ur case:  |  |  |                    |                               |
|---------|-------------------------|---|---|--|--|--------------------|-------------------------------|
| Deb     | tor 1                   | Quillita  | Tameka  | Rayford  | Check if this is:  | :                  |                               |
| Dob     | tor 2                   | First Name  | Middle Name                                     | Last Name  | An amend   | ŭ                  | notition chapter 12           |
|         | ise, if filing)         | First Name  | Middle Name                                     | Last Name  | <b>—</b> ···   | of the following o | -petition chapter 13<br>late: |
| Unit    | ed States               | Bankruptcy Court for the : _  | NORTHERN DISTRICT                               | OF ILLINOIS  |  |                    |                               |
|         | e Number                |   |   |  | MM / DD /  | YYYY               |                               |
| O#:•    | Sal F                   | orm 106 l   |   |  |  | _                  | 2 because Debtor 2            |
|         |                         | orm 106J  |   |  | — maintains  | a separate house   | hold.                         |
| Sch     | edul                    | e J: Your Ex <sub>l</sub>   | penses  |  |  |                    | 12/14                         |
|         | pace is r               | -   |   |  | ire equally responsible for supply<br>les, write your name and case nu | -                  |                               |
| Part '  | 1: 0                    | escribe Your Household  |   |  |  |                    |                               |
| 1. Is t | No. G                   | nt case? Go to line 2.  Does Debtor 2 live in a s  No.  Yes. Debtor 2 mus | separate household?<br>t file a separate Schedu | ile J.   |  |                    |                               |
| 2. I    | Do you h                | nave dependents?  | No  |  | Dependent's relationship to  | Dependent's        | Does dependent live           |
|         | Do not lis<br>Debtor 2. | et Debtor 1 and   |   | t this information for                                 | Debtor 1 or Debtor 2   | age                | with you?                     |
| ı       | Do not st               | ate the dependents'   | ·   |  | Son  | 1                  | Yes                           |
| ı       | names.                  |   |   |  |  |                    | X No                          |
|         |                         |   |   |  |  |                    | Yes                           |
|         |                         |   |   |  |  |                    | X No                          |
|         |                         |   |   |  |  |                    | Yes                           |
|         |                         |   |   |  |  |                    | Yes                           |
|         |                         |   |   |  |  |                    | X No                          |
|         |                         |   |   |  |  |                    | Yes                           |
|         | expense                 | expenses include<br>s of people other than<br>and your dependents?        | X No<br>Yes                                     |  |  |                    |                               |
| Part :  | 2; E                    | stimate Your Ongoing Mo   | onthly Expenses                                 |  |  |                    |                               |
| expen   | -                       | f a date after the bankru   | · · ·   |  | as a supplement in a Chapter 13<br>check the box at the top of the fo  | =                  |                               |
|         | -                       | =   | =   | ance if you know the value Income (Official Form 106). |  | ,                  | our expenses                  |
|         |                         |   |   |  |  |                    | Cui CAPONOCO                  |
|         |                         | al or home ownership e<br>for the ground or lot.                          | expenses for your resid                         | lence. Include first mortgage                          | payments and   | 4.                 | \$0.00                        |
|         | -                       | cluded in line 4:   |   |  |  |                    | ,,,,,,                        |
|         | 4a. Re                  | al estate taxes   |   |  |  | 4a.                | \$0.00                        |
|         | 4b. Pro                 | operty, homeowner's, or   | renter's insurance                              |  |  | 4b.                | \$0.00                        |
|         | 4c. Ho                  | me maintenance, repair,   | and upkeep expenses                             |  |  | 4c.                | \$25.00                       |
|         | 4d. Ho                  | meowner's association o   | or condominium dues                             |  |  | 4d.                | \$0.00                        |

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Document Rayford Quillita Tameka Debtor 1 Case Number (if known) \_

| otor     |   | Case Number (if known) |               |
|----------|---|------------------------|---------------|
|          | First Name Middle Name Last Name  |                        | Your expenses |
|          | Additional Mortgage payments for your residence, such as home equity loans                      | 5.                     | \$0.          |
|          |   | J.                     |               |
|          | Utilities: 6a. Electricity, heat, natural gas   | 6a.                    | \$285         |
|          | 6b. Water, sewer, garbage collection  | 6b.                    | \$0           |
|          | 6c. Telephone, cell phone, internet, satellite, and cable service                               | 6c.                    | \$100         |
|          | 6d. Other. Specify:   | 6d.                    | \$ 0          |
|          | Food and housekeeping supplies  | 7.                     | \$385         |
|          | Childcare and children's education costs  | 8.                     | \$0           |
|          | Clothing, laundry, and dry cleaning   | 9.                     | \$100         |
| ).       | Personal care products and services   | 10.                    | \$100         |
| 1.       | Medical and dental expenses   | 11.                    | \$50          |
| 2.       | Transportation. Include gas, maintenance, bus or train fare.                                    | 12.                    | \$308         |
|          | Do not include car payments.  |                        |               |
| 3.       | Entertainment, clubs, recreation, newspapers, magazines, and books                              | 13.                    | \$0           |
| ١.       | Charitable contributions and religious donations  | 14.                    | \$0           |
| 5.       | Insurance.  |                        |               |
|          | Do not include insurance deducted from your pay or included in lines 4 or 20.                   |                        |               |
|          | 15a. Life insurance   | 15a.                   | \$0           |
|          | 15b. Health insurance   | 15b.                   | \$0           |
|          | 15c. Vehicle insurance  | 15c.                   | \$115         |
|          | 15d. Other insurance. Specify:  | 15d.                   | \$0           |
| 6.       | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.                |                        |               |
|          | Specify:  | 16.                    | \$0           |
|          | Installment or lease payments:  |                        |               |
|          | 17a. Car payments for Vehicle 1   | 17a.                   | \$0           |
|          | 17b. Car payments for Vehicle 2   | 17b.                   | \$0           |
|          | 17c. Other. Specify:  | 17c.                   | \$0           |
|          | 17d. Other. Specify:  | 17d.                   | \$0           |
| <b>.</b> | Your payments of alimony, maintenance, and support that you did not report as deducted          |                        |               |
|          | from your pay on line 5, Schedule I, Your Income (Official Form 106I).                          | 18.                    | \$0           |
| ).       | Other payments you make to support others who do not live with you.                             |                        |               |
|          | Specify:  | 19.                    | \$0           |
| ١.       | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your I | Income.                |               |
|          | 20a. Mortgages on other property  | 20a.                   | \$ 0          |
|          | 20b. Real estate taxes  | 20b.                   | \$ 0          |
|          | 20c. Property, homeowner's, or renter's insurance   | 20c.                   | \$ 0          |
|          | 20d. Maintenance, repair, and upkeep expenses   | 20d.                   | \$ 0          |
|          | 20e. Homeowner's association or condominium dues  | 20e.                   | \$ 0          |

Official Form 106J Record # 739466 Schedule J: Your Expenses Page 2 of 3

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| Debtor | 1 Quillita        | Tameka  | Rayford                       | Case Number (if known) |               |            |
|--------|-------------------|---|-------------------------------|------------------------|---------------|------------|
|        | First Name        | Middle Name   | Last Name                     | · · · · ·              |               |            |
| 21.    | Other. Specify:   | Postage/Bank Fees (\$5.00),   |                               |                        | 21.           | \$5.00     |
| 22     | -                 | expense: Add lines 4 through 21.  |                               |                        | 22.           | \$1,473.88 |
|        | The result is you | ur monthly expenses.  |                               |                        |               |            |
| 23.    | Calculate your    | monthly net income.   |                               |                        |               |            |
|        | 23a. Cop          | y line 12 (your comibined monthly inc                                     | come) from Schedule I.        |                        | 23a.          | \$1,924.11 |
|        | 23b. Cop          | y your monthly expenses from line 22                                      | 2 above.                      |                        | 23b. <b>–</b> | \$1,473.88 |
|        |                   | tract your monthly expenses from your result is your monthly net income.  | ur monthly income.            |                        | 23c.          | \$450.23   |
|        |                   |   |                               |                        |               |            |
| 24.    | For example, do   | an increase or decrease in your expo you expect to finish paying for your | car loan within the year or o | do you expect your     |               |            |
|        | No Yes.           | ent to increase or decrease because  Explain Here:                        | of a modification to the term | ns of your mortgage?   |               |            |
|        |                   |   |                               |                        |               |            |
|        |                   |   |                               |                        |               |            |
|        |                   |   |                               |                        |               |            |

 Official Form 106J
 Record #
 739466
 Schedule J: Your Expenses
 Page 3 of 3

| Fill in this in           | fill in this information to identify your case: |                                      |                  |  |  |
|---------------------------|---|--------------------------------------|------------------|--|--|
| Debtor 1                  | Quillita  | Tameka                               | Rayford          |  |  |
|                           | First Name                                      | Middle Name                          | Last Name        |  |  |
| Debtor 2                  |   |                                      |                  |  |  |
| (Spouse, if filing)       | First Name                                      | Middle Name                          | Last Name        |  |  |
| United States             | Bankruptcy Court fo                             | or the : <u>NORTHERN</u> District of | ILLINOIS (State) |  |  |
| Case Number<br>(If known) |   |                                      | _                |  |  |

### Official Form 106 Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below  |   |  |  |  |  |  |
|---|---|--|--|--|--|--|
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? |   |  |  |  |  |  |
| No  |   |  |  |  |  |  |
| Yes. Name of Person   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |  |  |  |  |  |
|   |   |  |  |  |  |  |
|   |   |  |  |  |  |  |
| Under society of society I declare that I have used to  |   |  |  |  |  |  |
| correct.  | the summary and schedules filed with this declaration and that they are true and              |  |  |  |  |  |
| 6 (a) Ovillita Tarraka Barfand  | <b>x</b>  |  |  |  |  |  |
| /s/ Quillita Tameka Rayford Signature of Debtor 1   | Signature of Debtor 2   |  |  |  |  |  |
| Date 02/21/2017   | Date  |  |  |  |  |  |
| MM / DD / YYYY  | MM / DD / YYYY  |  |  |  |  |  |
|   |   |  |  |  |  |  |

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|                           |   | D(                                 | ocument rac      | $c \cup J \cup C$ |  |  |
|---------------------------|---|------------------------------------|------------------|-------------------|--|--|
| Fill in this in           | Fill in this information to identify your case: |                                    |                  |                   |  |  |
| Debtor 1                  | Quillita  | Tameka                             | Rayford          |                   |  |  |
|                           | First Name                                      | Middle Name                        | Last Name        |                   |  |  |
| Debtor 2                  | -   |                                    |                  |                   |  |  |
| (Spouse, if filing)       | First Name                                      | Middle Name                        | Last Name        |                   |  |  |
| United States             | Bankruptcy Court for t                          | ne : <u>NORTHERN</u> District of _ | ILLINOIS (State) |                   |  |  |
| Case Number<br>(If known) | ·   |                                    | _                |                   |  |  |
|                           |   |                                    |                  |                   |  |  |

### Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case

| number (if known). Answer every question.   |  |                                       |                            |  |  |  |  |
|---|--|---------------------------------------|----------------------------|--|--|--|--|
| Part 1: Give Details About Your Marital Status and Where You Lived Before                             |  |                                       |                            |  |  |  |  |
| 01. What is your current marital status?  |  |                                       |                            |  |  |  |  |
| Married   |  |                                       |                            |  |  |  |  |
| Not married   |  |                                       |                            |  |  |  |  |
| , set mained  |  |                                       |                            |  |  |  |  |
| 02 During the last 3 years, have you lived anywher  | e other than where you live no   | w?                                    |                            |  |  |  |  |
| □ No.   |  |                                       |                            |  |  |  |  |
| Yes. List all of the places you lived in the last   | 3 years. Do not include where y  | ou live now.                          |                            |  |  |  |  |
|   |  |                                       |                            |  |  |  |  |
| Debtor 1  | Dates Debtor 1 lived there   | Debtor 2:                             | Dates Debtor 2 lived there |  |  |  |  |
|   |  | Same as Debtor 1                      | Same as Debtor 1           |  |  |  |  |
| 211 E 90Th Pl   | FROM 01/2014   |                                       |                            |  |  |  |  |
| Chicago IL 60619-7335   | To 03/2016   |                                       |                            |  |  |  |  |
|   |  |                                       |                            |  |  |  |  |
|   |  |                                       |                            |  |  |  |  |
|   |  | Same as Debtor 1                      |                            |  |  |  |  |
| 3146 Camelot Cv   | FROM 09/2008   | Same as Debior 1                      | Same as Debtor 1           |  |  |  |  |
| Memphis TN 38118-3946   | FROM 09/2008 To 12/2013  |                                       |                            |  |  |  |  |
| Memphis 114 00110 0040  |  |                                       |                            |  |  |  |  |
|   | _  |                                       |                            |  |  |  |  |
|   |  |                                       |                            |  |  |  |  |
| 03 Within the last 8 years, did you ever live with a property states and territories include Arizona, |  |                                       | · -                        |  |  |  |  |
| and Wisconsin.)   | Camornia, Idano, Lodisiana, N  | evada, New Mexico, Fuelto Nico, Texas | s, wasnington,             |  |  |  |  |
| No.   |  |                                       |                            |  |  |  |  |
| Yes. Make sure you fill out Schedule H: Your  | Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). |                                       |                            |  |  |  |  |
|   |  |                                       |                            |  |  |  |  |
| Part 22 Explain the Sources of Your Income  |  |                                       |                            |  |  |  |  |
|   |  |                                       |                            |  |  |  |  |
|   |  |                                       |                            |  |  |  |  |
|   |  |                                       |                            |  |  |  |  |
|   |  |                                       |                            |  |  |  |  |
|   |  |                                       |                            |  |  |  |  |

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Debtor 1 Quillita Tameka Rayford Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$ 2,600 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, \$ 38,018 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2016) Operating a business Operating a business Wages, commissions, \$ 48,996 Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

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Quillita Tameka Rayford Case Number (if known) \_ Debtor 1 First Name Middle Name Last Name Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Was this payment for... Total amount paid Amount you still owe payments Westlake Financial SVC 4751 \$7,884 Monthly \$ 327 ■ Mortgage Car Wilshire Blvd Los Angeles CA Credit card 90010 Loan repayment Suppliers or vendors Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid 08 Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment Include creditor's name payment Part 4: Identify Legal actions, Repossessions, and Foreclosures

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<u>Quil</u>lita Tameka Rayford Case Number (if known) First Name Middle Name Last Name Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Yes. Fill in the details. Nature of the case Court or agency Status of the case 10 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11 Yes. Fill in the information below. Date Value of the property Describe the property \$5,000 2013 Nissan Sentra SAFCO June 2016 5900 Lake Ellenor Dr Orlando, FL 32809 **Explain what happened** Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. Describe the property Date Value of the property 2013 Nissan Sentra \$ 5,376 Westlake Financial SVC 2/16/2017 4751 Wilshire Blvd Los Angeles, CA 90010 Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. 11 Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No. Go to line 11 Yes. Fill in the information below. 12 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No. ☐ Yes. **List Certain Gifts and Contributions** 13 Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. 14 Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift.

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Document Page 43 of 63 <u>Quil</u>lita Tameka Rayford Case Number (if known) \_ First Name Middle Name Last Name List Certain Losses Part 6: 15 Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No. Yes. Fill in the details for each gift. **List Certain Payments or Transfers** Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No. Yes. Fill in the details **Party Contact Info** Description and value of any property transferred Date payment Amount of payment or transfer 2017 Payment/Value: Geraci Law L.L.C. \$4,000.00: \$0.00 55 E. Monroe Street #3400 paid prior to filing, Chicago,IL 60603 balance to be paid through the plan. **Party Contact Info** Description and value of any property transferred Date payment Amount of payment or transfer Credit Counseling Services Hananwill Credit Counseling 2017 \$25.00 115 N. Cross St. Robinson, IL 62454 17 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No. Yes. Fill in the details. 18 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No. Yes. Fill in the details for each gift. 19 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No. Yes. Fill in the details for each gift. List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8:

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Quillita Tameka Rayford Case Number (if known) Debtor 1 First Name Middle Name Last Name Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved, closing or transfer or transferred 21 Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Nο Yes. Fill in the details. Who else had access to it? Do you still Describe the contents have it? 22 Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have it? Identify Property You Hold or Control for Someone Else 23 Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Where is the property? Value Describe the property **Give Details About Environmental Information** Part 10: For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24 Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice 25 Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice 26 Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No. Yes. Fill in the details. Court or agency Nature of the case Status of the case

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|        |          |        | Document | Page 45 of 63          |
|--------|----------|--------|----------|------------------------|
| btor 1 | Quillita | Tameka | Rayford  | Case Number (if known) |

Last Name

Middle Name

| Par 111: Give Details About Your Business or Connections to Any  | Business   |  |  |  |  |  |
|--|--|--|--|--|--|--|
| 27 Within 4 years before you filed for bankruptcy, did you own a   | business or have any of the following connections to any business?   |  |  |  |  |  |
| A sole proprietor or self-employed in a trade, profession  | on, or other activity, either full-time or part-time   |  |  |  |  |  |
| A member of a limited liability company (LLC) or limite  | A member of a limited liability company (LLC) or limited liability partnership (LLP)   |  |  |  |  |  |
| A partner in a partnership   | A partner in a partnership   |  |  |  |  |  |
| ☐ An officer, director, or managing executive of a corpor  | — An officer, director, or managing executive of a corporation   |  |  |  |  |  |
| ☐ An owner of at least 5% of the voting or equity securiti   | An owner of at least 5% of the voting or equity securities of a corporation  |  |  |  |  |  |
| No. None of the above applies. Go to Part 12.  |  |  |  |  |  |  |
| Yes. Check all that apply above and fill in the details below for  | or each business.  |  |  |  |  |  |
| Within 2 years before you filed for bankruptcy, did you give a institutions, creditors, or other parties.  | financial statement to anyone about your business? Include all financial   |  |  |  |  |  |
| No.  |  |  |  |  |  |  |
| Yes. Fill in the details.  |  |  |  |  |  |  |
| Date issued  |  |  |  |  |  |  |
| Part 12: Sign Below  |  |  |  |  |  |  |
|  | ind any attachments, and I declare under penalty of perjury that the statement, concealing property, or obtaining money or property by fraud 250,000, or imprisonment for up to 20 years, or both. |  |  |  |  |  |
| 🗶 /s/ Quillita Tameka Rayford  | ×  |  |  |  |  |  |
| Signature of Debtor 1  | Signature of Debtor 2  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Date 02/21/2017  | Date   |  |  |  |  |  |
| MM / DD / YYYY   | MM / DD / YYYY   |  |  |  |  |  |
| Did you attach additional pages to <i>Your Statement of Financial Affairs for Individuals Filing for Bankruptcy</i> (Official Form 107)?  ■ No □ Yes |  |  |  |  |  |  |
| Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  |  |  |  |  |  |  |
| No   |  |  |  |  |  |  |
| Yes. Name of person  | Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).   |  |  |  |  |  |
|  |  |  |  |  |  |  |

First Name

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In r | e                |   |   |                       |  |   |           |
|------|------------------|---|---|-----------------------|--|---|-----------|
| Quil | llita Tameka     | a Rayford / Debtor  |   | Case No:              |  |   |           |
|      |                  |   |   |                       | Chapter:   | Chapter 13                              |           |
|      |                  | DISCLOS   | URE OF COMPE                                | NSATION OF A          | TTORNEY FOR DEI  | BTOR                                    |           |
|      | pensation pa     | 11 U.S.C. § 329(a) and Fed. Ba<br>aid to me within one year before<br>e rendered on behalf of the debto | ankr. P. 2016(b), I of the filing of the po | certify that I am the | ne attorney for the above<br>ccy, or agreed to be paid | ve named debtor(s<br>d to me, for servi | ces       |
|      | For legal se     | ervices, I have agreed to accept  |   | \$4,000.00            |  |   |           |
|      | Prior to the     | e filing of this statement I have r   | received                                    | \$0.00                |  |   |           |
|      | Balance D        | ue  | <del>-</del>                                | \$4,000.00            |  |   |           |
| 2.   | The source       | of the compensation paid to me  | was:  |                       |  |   |           |
|      | Debte            | or(s) Other: (specif  | fy)   |                       |  |   |           |
| 3.   | The source       | of compensation to be paid to m   | ne is:                                      |                       |  |   |           |
|      | Deb              | tor(s) Other: (specif   | £.)   |                       |  |   |           |
| 4.   | I have           | not agreed to share the above-dilaw firm.   |   | tion with any othe    | er person unless they ar                               | re members and a                        | ssociates |
| 5.   | of my<br>attache | agreed to share the above-discled law firm. A copy of the agreemed.  r the above-disclosed fee, I have  | nent, together with                         | a list of the names   | s of the people sharing                                | in the compensat                        |           |
|      | case, includ     | ling:   |   |                       |  |   |           |
|      | a. Analys        | sis of the debtor's financial situa   | ation, and rendering                        | g advice to the del   | btor in determining wh                                 | ether to file a pet                     | ition in  |
|      | bankru           | iptcy;  |   |                       |  |   |           |
|      | b. Prepar        | ration and filing of any petition,  | schedules, stateme                          | nts of affairs and p  | plan which may be req                                  | uired;                                  |           |
|      | c. Repres        | sentation of the debtor at the med  | eting of creditors a                        | and confirmation h    | earing, and any adjour                                 | ned hearings ther                       | eof;      |
| 6.   | By agreeme       | ent with the debtor(s), the above-  | -disclosed fee does                         | s not include the fo  | ollowing service:                                      |   |           |
|      |                  |   |   |                       |  |   |           |
|      | ſ                |   | CERT  | TIFICATION            |  |   |           |
|      |                  | I certify that the foregoing  | is a complete state                         | ment of any agree     | ment or arrangement f                                  | or                                      |           |
|      |                  | payment to me for representation of the del   | btor(s) in this bank                        | ruptcy proceeding     | gs.  |   |           |
|      |                  | Date: 02/22/2017  |   | isa LaShawn Hal       |  |   |           |
|      |                  | Date  | Sign  | nature of Attorney    |  |   |           |
|      |                  |   | Gei   | raci Law L.L.C.       |  |   |           |

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Name of law firm

### UNITED STAPES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

### A. BEFORE THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1: Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

### THE ATTORNEY AGREES TO

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



- Case 17-05105 Doc 1 Filed 02/22/17 Entered 02/22/17 14:34:30 Desc Main 3. Personally review with the debtor and signification confidence of the confidence of paralegal statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

### **B.** AFTER THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the 'debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

### THE ATTORNEY AGREES TO

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

**PFG Rec# 739-466** CARA Page 2 of 6

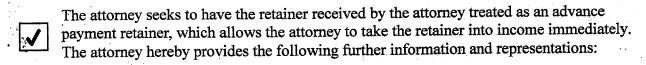
- Case 17-05105 Doc 1 Filed 02/22/17 Entered 02/22/17 14:34:30 Desc Main 2. Inform the debtor that the debtor musicul panetual and in the debtor that the debtor musicul panetual and in the fease of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307 (a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: purpose: provide some money for attorney without waiting 6 months. Advantage to debtor: costs client less by reducing administrative expense and encouraging efficiency rather than charging by hour and submitting bills.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;



- Case 17-05105 Doc 1 Filed 02/22/17 Entered 02/22/17 14:34:30 Desc Mail (d) Any portion of the retainer that is unoterained Bagga Siled for Expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

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Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4,000.00
 In addition, the debtor will pay the filing fee in the case and other expenses of \$310.00

3. Before signing this agreement, the attorney has received ,\$ \_\_\_\_\_\_\_ toward the flat fee, leaving a balance due of \$ \_\_\_\_\_\_ ; and \$ \_\_\_\_\_\_ for expenses, leaving a balance due for the filing fee of \$

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 21/1/

Signed:

• • •

Co-Debtor(s)

Attorney for the Debto (s)

Do not sign this agreement if the amounts are blank.

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National Headquarters: 55 E. Monroe Steel (#3400@Criticago, IR & 1666925-1313 help@geracilaw.com



Date: 2/21/2017

Consultation Attorney:

Record #: 739-466

Attorney - Client Agreement

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter13 bankruptcy under the following terms and conditions. I have signed and received a copy the "Court Approved Retention Agreement" (CARA) between Chapter 13 Debtors and their Attorneys" as established by the Bankruptcy Court for the Northern District of Illinois, and any terms that conflict with it are null and void. I understand I must comply with those terms. Attorney fees for filed Chapter 13 Bankruptcy shall be the fee stated in the CARA I have received the 11U.S.C § 527(a) disclosures. I have been advised of my chapter 7 alternative and choose to file Chapter 13 instead even though it usually costs more. More than one attorney and paralegal will work on my case.

FEES; This does NOT INCLUDE court filing fees of \$310, costs for credit counseling or financial management classes. Any amount not paid prior to the case being filed shall be paid through the Chapter 13 Trustee. These fees are fixed, but the attorneys may apply to the court for additional fees if allowed by the CARA or other circumstances, such as extended evidentiary hearings, contested adversary proceedings or appeals. If the Court awards additional fees, they will also be paid through the Chapter 13 Trustee. Fees are "flat fees" and "advance payment retainers" for pre-filing and pre-confirmation work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". If this contract is terminated by either party prior to the filing of the case, we will submit any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed.

No other work: Geraci Law is not representing me in state or other courts regarding creditors in my bankruptcy. Any state court action not stopped by the Automatic Stay of a filed bankrutpcy is my responsibility. Injury or other claims or property I must disclose any such claims or propery I now have or acquire after filing Chapter 13 to both the

Chapter 13 trustee and to the court in a filed amendment and obtain authority to keep them or pay those claims to the Trustee.

per month for \_\_\_\_\_\_ months. The payment and length of the plan are based PLAN: The plan payment is estimated to be \$ on the information I have provided, including income, expenses, assets and debts. If these amounts are not accurate, my plan payment or duration may need to be increased. In addition, the Court, Chapter 13 Trustee or creditors could object to my proposed Chapter 13 payment, which may cause it to increase. I further understand that if my income or expenses change during my Chapter 13, my plan payment may have to change. I agree to read my petition and plan and study it before signing it so I know what is included, INCLUDING what I am listing as debts, what my property is, what my assets are and if they are claimed as exempt, and to make full disclosure.

My plan payment DOES include the following, unless stated otherwise: mortgage arrears; association arrears; vehicles; tax debt; support obligations that are post due (but not future) parking tickets (not traffic fines); debts pursuant to a divorce decree/marital settlement you listed; other secured debts including furniture, electronics, etc.; all other unsecured debts; other: My plan payment does NOT include include future mortgage, rent, condo fees and support payments; criminal fines/court fees; rent/lease arrears; student loan principal and interest unless 100% planned to unsecured creditors, sold property taxes; debts incurred after the case is filed, including any association fees as long as the property is in my name; other

Student loans: are usually NEVER paid 100% in a Chapter 13, but are paid the same percentage as unsecured creditors without interest, so my student loans will CONTINUE to accrue interest, and if I don't pay them directly they will be even larger at the end of the plan, so I have been told about this and I will deal with my student loans myself directly

Debts not discharged if they not paid in full: student loans; educational debts; unfiled or late filed tax debts; undisclosed debts; support/maintenance debts; debts incurred by fraud, or debts listed in your red folder or found non-dischargeable by a Judge. Representation limited to Bankruptcy Court We do not represent you in state court, or in loan modifications or similar matters.

If I am eligible to receive a tax refund during my Chapter 13, I understand I must turn it over to the Chapter 13 Trustee unless I am specifically advised that I do not need to. This may change on a yearly basis, so I must check with my attorneys every year. I also understand that if I receive any significant sums of money other than through employment, including but not limited to life insurance proceeds, workers compensation award, personal injury or other court settlement, I MUST notify my attorney immediately and I may have to pay some or all of the funds into my Chapter 13 plan.

I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition. If I fail to remain current in a domestic support obligation, fail to certify to the gourt that I have remained current, or if I fail to take my financial management class, that my case may be closed without a discharge, and will be required to pay a fee to have it reopened.

Quillita Rayford (Debtor)

Joint Debtor)

Attorney for the Debtor(s)

Representing Geraci Law L.L.C.

Dated: 2/EI

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# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

| Quillita Tameka Rayford / Debtor | Bankruptcy Docket # |
|----------------------------------|---------------------|
|                                  |                     |

Judge:

### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 02/21/2017 /s/ Quillita Tameka Rayford

**Quillita Tameka Rayford** 

X Date & Sign

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<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

B 201A (Form 201A) (11/11)

### Document Page 55 of 63

### UNITED STATES BANKRUPTCY COURT

## NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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Form B 201A, Notice to Consumer Debtor(s)

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In re Quillita Tameka Rayford / Debto Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| ayford     |
|------------|
| ~ <b>,</b> |
|            |
|            |
|            |

Dated: 02/22/2017 /s/ Lisa LaShawn Haley

Attorney: Lisa LaShawn Haley

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| Debtor 1                                | Quillita                                       | T Rayfo   | ord Case Numb   | er (if known)   |  |  |  |  |
|---|--|---|---|---|--|--|--|--|
| CDIOI                                   | First Name                                     | Middle Name Last Nam  | ,   |   |  |  |  |  |
|   |  |   |   |   |  |  |  |  |
| Part 6:                                 | Answer These Question                          | ns for Reporting Purposes   |   |   |  |  |  |  |
| 16. What kind of debts do               |  | 16a. Are your debts primar<br>as "incurred by an individu                               | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."   |   |  |  |  |  |
| yc                                      | ou have?                                       | No. Go to line 16b. Yes. Go to line 17.   |   |   |  |  |  |  |
|   |  | 16b. <b>Are your debts primar</b><br>money for a business or it                         | ily business debts? Business debts are onestment or through the operation of the bu   | debts that you incurred to obtain siness or investment.                       |  |  |  |  |
|   |  | No. Go to line 16c. Yes. Go to line 17.   |   |   |  |  |  |  |
|   |  | 16c. State the type of debts yo   | u owe that are not consumer debts or busing   | ess debts.  |  |  |  |  |
|   |  |   |   |   |  |  |  |  |
|   | re you filing under<br>hapter 7?               | No. I am not filing under   | •   |   |  |  |  |  |
|   | o you estimate that after                      |   | apter 7. Do you estimate that after any exer<br>nses are paid that funds will be available to o   | npt property is excluded and distribute to unsecured creditors?               |  |  |  |  |
|   | ny exempt property is<br>xcluded and           | ☐No.  |   |   |  |  |  |  |
| -                                       | dministrative expenses                         | ∏Yes.   |   |   |  |  |  |  |
|   | re paid that funds will be                     | , <u> </u>  |   |   |  |  |  |  |
| _                                       | vailable for distribution unsecured creditors? |   |   |   |  |  |  |  |
|   |  | <b>-</b>  | 1,000-5,000   | 25,001-50,000   |  |  |  |  |
|   | low many creditors do<br>ou∘estimate that you  | ■ 1-49<br>□ 50-99   | ☐ 5,001-10,000  | □ 50,001-100,000  |  |  |  |  |
|   | we?  | ☐ 100-199   | 10,001-25,000   | ☐ More than 100,000   |  |  |  |  |
| -                                       | · <del> ,</del> -                              | 200-999   | <del>-</del> .:   |   |  |  |  |  |
|   |  | \$0-\$50,000  | \$1,000,001-\$10 million  | \$500,000,001-\$1 billion   |  |  |  |  |
|   | low much do you<br>estimate your assets to     | \$50,001-\$100,000  | \$10,000,001-\$50 million   | ☐\$1,000,000,001-\$10 billion   |  |  |  |  |
|   | e worth?                                       | \$100,001-\$500,000   | \$50,000,001-\$100 million  | □\$10,000,000,001-\$50 billion  |  |  |  |  |
|   |  | \$500,001-\$1 million   | ■ \$100,000,001-\$500 million   | ☐More than \$50 billion   |  |  |  |  |
| 00 L                                    | low much do you                                | ☐ \$0-\$50,000  | ☐ \$1,000,001-\$10 million  | \$500,000,001-\$1 billion   |  |  |  |  |
|   | estimate your liabilities                      | \$50,001-\$100,000  | ☐ \$10,000,001-\$50 million   | \$1,000,000,001-\$10 billion  |  |  |  |  |
| 1                                       | o be?  | \$100,001-\$500,000   | \$50,000,001-\$100 million  | \$10,000,000,001-\$50 billion   |  |  |  |  |
|   |  | □ \$500,001-\$1 million   | \$100,000,001-\$500 million   | ☐ More than \$50 billion  |  |  |  |  |
| Part '                                  | 7: Sign Below                                  |   |   |   |  |  |  |  |
| T GIC                                   | Jigii Delott                                   |   |   |   |  |  |  |  |
| For y                                   | ou   | I have examined this petition, a correct.   | and I declare under penalty of perjury that th  | e information provided is true and  |  |  |  |  |
|   |  | If I have chosen to file under C<br>of title 11, United States Code<br>under Chapter 7. | hapter 7, I am aware that I may proceed, if<br>I understand the relief available under each   | eligible, under Chapter 7, 11,12, or 13<br>n chapter, and I choose to proceed |  |  |  |  |
| *************************************** |  | If no attorney represents me a this document, I have obtained                           | nd I did not pay or agree to pay someone w<br>d and read the notice required by 11 U.S.C.   | ho is not an attorney to help me fill out<br>§ 342(b).                        |  |  |  |  |
|   |  | •   | with the chapter of title 11, United States Co  |   |  |  |  |  |
|   |  | with a bankruptcy case can re   | I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571. |   |  |  |  |  |
|   |  | 1)11-   |   |   |  |  |  |  |
| ************************                |  | Signature of Debtor 1   | Carl X  | Signature of Debtor 2   |  |  |  |  |
|   |  | Executed on <u>65/</u>  | <u>2                                    </u>  | Executed onMM / DD / YYYY   |  |  |  |  |

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### Official Form 106 Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below   |   |
|--|---|
| Did you pay or agree to pay someone who is NOT an attorney to help you   | ı fili out bankruptcy forms?  |
| No Name of Person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| •  |   |
| Under penalty of perjury, I declare that I have read the summary and sch | edules filed with this declaration and that they are true and                                 |
| * Cult fay \ X Signature of Debtor 1                                     | ature of Debtor 2   |
| Date   | MM / DD / YYYY  |

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| Debtor 1  | Quillita                                      | Ţ   | Rayford   | Case Number (if known)   |    |  |
|---|---|---|---|--|----|--|
|   | First Name                                    | Middle Name   | Last Name   |  |    |  |
|   | thin 2 years before youttutions, creditors, o |   | you give a financial statement                                  | to anyone about your business? Include all financial   | -  |  |
|   | ∣ No.<br>  Yes. Fill in the details           | ,   |   |  |    |  |
|   | res. Fill III the details                     | Date Is:  | sued  |  |    |  |
| Part 1  | 2: Sign Below                                 |   | <u></u>   |  |    |  |
| ans<br>in c   | wers are true and cor                         | rect. I understand that mak<br>kruptcy case can result in f | ing a false statement, conceal ines up to \$250,000, or impriso | s, and I declare under penalty of perjury that the ng property, or obtaining money or property by fraud symment for up to 20 years, or both.  f Debtor 2 |    |  |
| Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |   |   |   |  |    |  |
|   | No<br>Yes                                     |   |   |  |    |  |
| Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?                                 |   |   |   |  |    |  |
|   | No  |   |   |  |    |  |
|   | Yes. Name of person                           | n   |   | Attach the Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119   | ). |  |
| 8   | •   |   |   |  |    |  |

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### DISCLAIMER Deptors have read and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- 3. Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for fimily support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- 4. TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met:

  (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2
  YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District
  Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend
  you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes
  and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above
  time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt.
   b. Failure to keep books and records documenting your financial affairs.
   c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay.
   d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others
   e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy.
   f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURE OUR PETITION IS ACCURATE!!!!

Dated: 02/2/2017

Quillita T Rayford

X Date & Sign

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# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Quillita T Rayford / Debtor

Bankruptcy Docket #:

Judge:

### VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 05 1 2 12017

Quillita T Rayford

X Date & Sign

B 1D (Official Form 1, Exh.D)(12/08)

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<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

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Part 4:

Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

,

Date: 03 / 2-1 /2017

If you checked line 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Form B 201A, Notice to Consumer Debtor(s)

In re Quillita T Rayford / Debtor

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee. \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated 02 12017

Quillita Taxayford

X Date & Sign

Dated: 0 /00/2017

Attorney: Lisa LaShawn Haley

Form B 201A. Notice to Consumer Debtor(s)

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